

<p style="text-align: center;">ERIE COUNTY DEPARTMENT OF CORRECTIONS 1618 Ash Street Erie, Pennsylvania 16503-2168</p>			
CHAPTER SECURITY	SUBJECT CLASSIFICATION SYSTEM		
# PAGES 7	POLICY 200-16	EFFECTIVE DATE JANUARY 1, 2015	REPLACES MAY 2012

I. **POLICY**

It is the policy of the Erie County Department of Corrections to follow a formal classification process that starts at admission, for managing and separating inmates, and administering the facility based upon the agency mission, classification goals, and inmate custody and program needs. The process uses verifiable and documented data about inmates. The classification system is used to separate inmates into groups that reduce the probability of assault and disruptive behavior. At a minimum, the classification system evaluates the following: mental and emotional stability, escape history, history of assaultive behavior, medical status, age, and need to keep separate.

II. **REFERENCE**

PA Code, Title 37 § 95.225; A.C.A. 4-ALDF-2A-30 through 2A-36

III. **DEFINITIONS**

Assessment Unit: a pod/housing unit designated to house newly incarcerated inmates where they will undergo an evaluation classification procedure prior to receiving a prison housing unit assignment. This unit functions as a central area for the classification and service staff to exercise greater control over the placement and provision of services prior to inmates entering population; and allows for behavioral observation in similar surroundings to those the inmate will experience once placed in population and provides a central area for conducting medical, mental health, security and programming assessments.

Custody/Security Levels:

- Minimum Security: least restrictive classification level, eligible for normal programming and outside programming as designated by the sentencing court and programming/treatment staff. Most eligible for trusty, community service, work release, school release and electronic monitoring status. * Any inmate participating in work or educational release programs will be separated from all other Erie County Prison inmates.

- General: higher supervision level than minimum and eligible for normal inside programming.
- Max: higher supervision and custody level (close custody), restricted program eligibility. Inmates in this classification are considered the most predatory; with current or prior violent felony crimes, escape history or propensity whose institutional behavior has indicated a need for segregation.
- Administrative Segregation: an inmate custody level designated to separate inmates with "special need" requirements from inmates in general population. Special supervision and housing will take place with programming and services determined by security and custody status in addition to the reasons for this placement. Placement in this custody level will generally be based on medical, mental health, protective or security concerns.
- RHU/Restricted: housing unit that requires constant security supervision with limited out of cell access. Housing in this unit is based primarily on institutional misconduct(s). Program eligibility will be in-cell only.

Evaluative Classification: this procedure is completed whenever possible, within seventy-two (72) hours after the inmate's commitment and prior to the assignment to longer term housing by the classification unit. The classification officer conducts the following:

- A personal interview with the inmate.
- The Inmate Management Information System is checked to review the incarceration history of the inmate during prior incarcerations and while in the "Assessment Unit."
- A check of the inmate's criminal history is contained in the NCIC and/or prison records file for applicable information.
- An assessment to determine the degree of "at risk" behavior according to the following categories based upon available information including that which is compiled during the booking process:
 - Suicide potential
 - Mental health problems
 - Medical needs
 - Need for protective custody
 - Sexual assault potential
 - Propensity for assaultive/aggressive behavior
 - Escape risk potential
 - Previous institutional behavioral problems
- The classification officer will then factor in the recommendations of the medical and mental health staff when making housing and classification determinations.

Initial Risk Assessment (Booking Observation Questions): this screening is completed after the pat search as part of the booking process in the admissions

area and prior to the inmate's placement in the Assessment Unit. It is based on a multiple question self-reporting form completed by the booking officer that assesses current charges, observed medical or mental health problems, substance abuse, observed behavior problems, observations from committing agencies, recommendations from the O.I.C., correctional and/or service staff, and/or any applicable on file classification alerts. It includes:

- Custody Search Assessment: a questionnaire completed to determine inmate search status and gather data with regard to criminal history, committing agency information and booking staff observation.
- Risk Assessment Screening: a questionnaire completed during the booking process and prior to placing an inmate in assessment Unit, used to identify special inmate needs and security concerns to determine initial custody housing assignment.

Objective Classification: a process, applied equally to all inmates that combine legal elements and personal characteristics to determine institutional placement, the provision of services and eligibility for programming.

Reclassification: a process that reviews an inmate's security and custody level necessitated by institutional behavior, observed behavior changes, changes in legal status, staff requests, inmate requests or request from legal authorities.

IV. **PROCEDURE**

A. Initial Risk Assessment (Booking Observation Questions)

- Custody Search Assessment
 1. This will be conducted at the time of commitment in the admission and release area by the admissions officer:
 - He/she will visually observe the inmate for any medical, mental health or security concerns.
 - Will query the committing agency as to whether he/she has any pertinent information regarding security, medical, mental health, or protective custody concerns relating to the inmate.
 - Will conduct an oral interview with the inmate with regards to current charges and prior criminal history.
 - Will make a determination if the new commitment will be strip searched or not and placed in the holding area until time permits to place the inmate in the Assessment Unit.
- Risk Assessment Screening

1. This will be conducted in the admissions and release area as part of the search and booking process and prior to the inmate's placement in the Assessment Unit.
 - The Initial Risk Assessment/Booking Observation Questions Form will be completed and signed by the booking officer, inmate, and supervisor.
 - The shift O.I.C. shall be notified if any "yes" responses have been answered which indicate that the inmate presents an immediate institutional security risk based on security and/or medical information; to include psychiatric.
 - The booking officers initial observation and "yes" responses on the form will alert staff of any special problems relating to potential behavior problems, victimization, security risk, medical or mental health problems posed by the inmate.
2. The Initial Risk Assessment will determine the inmate's placement in the Assessment Unit and subsequent decisions affecting the inmate's placement in the Assessment Unit, or longer-term housing. This will be made subsequently by the classification officer or the appropriate service provider
3. Prior to placement into the Assessment Unit a medical and mental health evaluation shall be completed by medical staff.

B. Housing Assignment in Assessment Unit

1. Generally all male inmates are initially assigned to short term housing in the Assessment Unit (BB pod).
2. Placement within the Assessment Unit is based upon an inmate's responses and information received during the booking process, Custody Search and Initial Risk Assessments.
3. The Assessment Unit can house both custody levels (general and administrative segregation) and all security levels (maximum, general population and minimum). Housing assignments in this unit will be divided as such:
 - General Population and Minimum - double bunking, normal dayroom access and privileges, and has not been assessed as being "at risk."
 - Maximum – generally initially placed in FF pod based on custody level and/or charge requirements. If initially housed in BB, restricted dayroom access and limited privileges based on nature of criminal charge(s), institutional behavior, security concerns and presenting behavior.

- Administrative segregation — generally initially placed in EE or AA/RHU based on Initial Risk Assessment. If initially housed in BB, and designated this; he or she should be celled singly, unless otherwise indicated, and in the most observable cells (bottom level, cells #10 thru #15 and #32 and 33).
 - Youthful Offenders – Cells #43 thru #48 in B Pod will be used to house male youthful offenders. Cell #43 (and #44 if needed) in A Pod will be utilized for housing female youthful offenders.
4. Prior to transfer out of the Assessment Unit, the prison orientation process must be completed.
 5. An evaluative classification procedure shall take place while the inmate is in the Assessment Unit or other short-term initial placement.
 6. The classification officer will work with service providers as needed prior to moving inmates out of initial housing.

C. Evaluative Classification

1. This classification process will be completed, whenever possible, within seventy-two (72) hours after an inmate is committed to the prison and prior to the inmate's assignment to longer term housing by the classification officer. If not completed within 72 hours the classification officer will note the reasons for delay in the classification notes. The classification officer will:
 - a. Initiate a counseling/counselor file in order to provide a record of the inmate's incarceration.
 - b. Review the inmate's institutional behavior and behavior history.
 - c. Conduct a private personal interview, security permitting, in order to complete the classification testing available on the jail management system.
 - d. Will assess the inmate's propensity for being "at risk" based upon available information related to the following categories:
 - Suicide potential.
 - Mental health problems.
 - Medical problems.
 - Protective custody needs.
 - Sexual assault potential.
 - Potential for assaultive/aggressive behavior.

- Escape risk potential.
- Previous institutional behavior problems.
- Age (elderly, juvenile).

e. Make a formal housing assignment based on the proceeding information, allowing recommendations from the medical, mental health, and/or security staff, if applicable.

D. Housing Assignment/Security Classification

1. Inmate management and housing assignment are based on age, gender, legal status, custody needs, special problems and needs, and behavior. Male, female, and juvenile inmates are always held in separate cells.
 - The facility supports inmate separation according to existing laws and regulation and/or according to our established classification plan.
2. This process is based on all the considerations taken into account during "evaluative classification". These housing assignments are used to denote the security considerations, type of housing and program eligibility for the classified inmate. They include the following:
 - Minimum.
 - General population.
 - Maximum.
 - Administrative segregation.
3. No less than 10 percent of the rated capacity of the facility is available for single occupancy. Single occupancy cells are available when indicated for the following:
 - Maximum security (close custody needs).
 - Inmates with severe medical disabilities.
 - Inmates suffering from serious mental illness.
 - Sexual predators.
 - Inmates likely to be exploited or victimized by others.
 - Juveniles.
 - Inmates who have other special needs for single-occupancy housing.
4. The inmate file will be transferred to the inmate's assigned housing unit with the inmate when he is moved.
5. The inmate's assigned housing unit will be considered permanent until such time as re-classification is necessitated.

E. Reclassification

1. A review of an inmate's classification status may be made at any time.
2. The inmate classification process ensures periodic (180 day) review of inmate status, and revision of inmate status as needed in response to changes in inmate behavior or circumstances.
3. Reclassification can occur upon a review according to the following:
 - At the written request of the inmate including a statement indicating the reason(s) for the request. This is to be forwarded to the inmate review committee for consideration.
 - At the request of legal authorities, including but not limited to, Erie County Department of Corrections staff, court officials, program providers and law enforcement agents.
 - Based upon staff observed behaviors.
 - As a result of a change in an inmate's legal status.
 - Periodic (180 day) review will be initiated automatically by the inmate's counselor.
4. The review of an inmate's classification status will be conducted by the Inmate Review Committee (See Inmate Review Committee Policy)
5. There is a process for appeal of classification decisions and an inmate may request that an administrative review be held when the inmate's classification results in significant restrictions arising from the change in classification status. The inmate's appeal request must be in writing to the Inmate Review Committee (or through the inmate grievance system).

F. Classification Override

1. At the time of evaluative classification, the classification officer, the shift O.I.C. or a higher level of command, can override the classification result.
 - Any override must include a noted justification on the evaluative classification and maintained with the inmate's classification file.

<p style="text-align: center;"> ERIE COUNTY DEPARTMENT OF CORRECTIONS 1618 Ash Street Erie, Pennsylvania 16503-2168 </p>			
CHAPTER CARE	SUBJECT INMATE "ISSUE"		
# PAGES 4	POLICY 310-02	EFFECTIVE DATE JANUARY 1, 2015	REPLACES DECEMBER 2013

I. **POLICY**

It is the policy of the Erie County Department of Corrections to carefully search all incoming property and permit only those items necessary for discharge or court related proceedings. The Erie County Department of Corrections will provide all inmates with clean, well-fitting clothing appropriate for the season and clean bedding and linens.

II. **REFERENCE**

A.C.A. 4-ALDF-4B-01 through 05, Title 37 § 95.229

III. **DEFINITION**

Issued (All Inmates): Blanket, sheet, pillowcase, towel, mattress, blue bin.

Issued (Females): All female offenders committed shall receive the following items: One (1) pair of uniform pants, one (1) uniform shirt, or one (1) jumpsuit type uniform; one (1) undershirt, one (1) night shirt, two (2) pair of panties, one (1) bra, one (1) pair of socks, one (1) pair of sandals

Issued (Males): All male offenders committed shall receive the following items: One (1) pair of uniform pants, one (1) uniform shirt, or one (1) jumpsuit type uniform; one (1) undershirt, one (1) pair of underwear, one (1) pair of socks, one (1) pair of sandals

Personal/Purchased (All Inmates): Any washable item not issued by the Department of Corrections.

Inmate Issued Property Replacement Form: form used for replacement of issued property that is worn or damaged through no fault of the inmate.

Starter Kit: Upon commitment all offenders shall receive a starter kit containing the following items: one (1) toothbrush, one (1) toothpaste, one (1) bar of soap,

one (1) comb, one (1) pencil, one (1) stamped envelope and three (3) sheet of line paper.

IV. **GENERAL INFORMATION**

It shall be the responsibility of the officer assigned to the property room to distribute standard issue items at time of commitment only. It shall be the offenders' responsibility to maintain the cleanliness of these items as per the laundry schedule for his/her housing unit. All offenders may purchase additional under-garments, socks, and/or sneakers, at their own expense from the prison commissary. Indigent offenders may request replacement undergarments and/or socks providing they meet the requirements set forth in the indigent offender policy. All standard issued items other than undergarments, socks and starter kits must be returned undamaged at time of discharge. Replacement of damaged property will be the responsibility of the offender.

V. **PROCEDURE**

A. Prison Issue

1. All offenders committed to the Erie County Prison shall surrender their personal clothing and property, at time of shakedown, to the officer assigned to the property room.
2. Each offender shall receive the standard issued items, based on their gender.
3. Prior to placing an inmate in general population, the inmate is given an opportunity to shower.
4. Each offender shall receive the basic issue items prior to being moved from the Admission and Release holding cells.
5. Each offender is responsible for his/her standard issue items. Replacement of said items is the responsibility of the inmate via commissary.
6. Each offender at time of discharge must return all issued items other than undergarments, socks, and starter kit. Replacement cost of any damaged property will be the responsibility of the offender.
7. No officer is permitted to dispense any additional underwear, undershirts, bras, panties, or socks unless prior approval is granted by the Deputy Warden of Administrative Services.

B. Inmate Personal Property

1. All offender clothing and property shall be inventoried via computer with a sufficient description to ensure easy identification and condition at time of processing.
2. All offenders clothing worn or brought into the facility will be thoroughly searched for contraband.
3. Both the officer and the offender will sign the inventory form when printed. Refusal by the offender will be noted on the form.
4. Offenders shall be permitted to store one (1) set of court clothes and one (1) set of street clothes, including shoes, in their property bag all other items are considered excessive.
5. Offenders upon admission shall be permitted to keep on their persons; legal work, approved medical devices (including glasses) and one (1) wedding band (no stones). All other jewelry, hair weaves, extensions, etc., will be removed.
6. Offenders shall not exchange, give, sell or receive property with, to, or from other offenders.
7. No offenders shall enter the property room at any time (exception: inmate workers performing maintenance functions while under the direct supervision of an officer).
8. If the offender is required to surrender any or all of their property to any authority based on a search warrant, a copy of the warrant and inventory sheet must go to the offender, and another copy is to be placed into their prison file.

C. Court Clothes

1. Offenders shall be permitted to store one (1) set of court clothes for the pending trial term up to 48 hours before and 7 days after their trial date is to begin. The Court Administrator will supply the Erie County Prison with a list of offenders who are scheduled for trial. This list will include the trials scheduled for one day and backup trials (in the event a trial is completed early).
2. Court clothes may be accepted up to 48 hours prior to the offenders' trial date, during regular prison business hours (not during lockdowns or "no move" times). Admissions/Release staff will list clothes on paper receipt, obtain a signature from the person dropping off the clothes on the receipt, and hang the clothes in the appropriate area.

3. Court clothes must be removed from the prison within seven (7) days of the completion of the offenders' trial. Admissions/Release staff shall have the inmate fill out a request slip stating who will be picking up the court clothes and advise them of the time frame for pick up.
4. Any court clothes that are not claimed within the above mentioned seven (7) days will be ceased and/or discarded.

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<p style="text-align: center;"> CHAPTER SAFETY </p>	<p style="text-align: center;"> SUBJECT HUNGER STRIKE PLAN </p>		
<p style="text-align: center;"> # PAGES 3 </p>	<p style="text-align: center;"> POLICY 120-13 </p>	<p style="text-align: center;"> EFFECTIVE DATE APRIL 10, 2017 </p>	<p style="text-align: center;"> REPLACES JANUARY 2015 </p>

I. POLICY

The Erie County Prison will employ standards and procedures to be used when an inmate has declared himself/herself to be on a hunger strike. It is our policy that such inmates are identified and monitored both medically and mentally during the period of the declared hunger strike.

II. REFERENCES

A.C.A. 4-ALDF-1C-05

III. GENERAL INFORMATION

Complete refusal of both food and drink may result in serious medical complications within days. Refusal to accept food while continuing to accept liquid nourishment is less dangerous. If calorie containing liquids are accepted, the circumstances should not be considered a hunger strike unless continuing weight loss is documented.

IV. DEFINITIONS

Once an inmate declares they are going on a hunger strike, or Correctional staff observed the inmate/patient has not been eating. Correctional staff will notify the medical department and food logs will be initiated for 48 hours. The food logs will be reviewed every shift by the medical department, and documented in the patient's medical record. If the patient is not taking any foods or food intake is less than 50% for 24 hours the hunger strike protocol will be initiated (as described in Procedures).

V. PROCEDURES

1. When an inmate is identified as being on a hunger strike, he/she should be referred to the Medical Department for a physical assessment, including

weight and vital signs. The findings of the assessment should be documented in the inmate's health record. Baseline laboratory testing, diagnostic profile and urine dipstick will be performed at the discretion of the physician or physician extender.

2. The inmate will be referred to mental health for a psychological evaluation. Ongoing mental health evaluations will be scheduled as indicated by the initial psychological evaluation.
3. Following the initial evaluations the inmate will be assessed at least every 24 hours while on a hunger strike. The evaluation includes an assessment for dehydration and malnutrition as well as weight and vital signs. A registered nurse may complete the assessment. The assessments are documented in the inmate's health record. Additional monitoring may be ordered at the discretion of the site Medical Director.
4. Health staff will counsel the inmate on the consequences of the hunger strike on a regular basis. The counseling is documented in the inmate's health record.
5. Inmates may refuse services, however, they are required to report to the Medical department and refuse directly to the health care staff.
6. The inmate is housed in an area that allows caloric intake to be monitored and measured. The inmate may be housed in the infirmary if warranted by their health status.
7. All food items will be removed from the inmate's housing location and commissary privileges will be suspended for the duration of the hunger strike.
8. The inmate will be given the opportunity to partake in each scheduled meal. The inmate should be provided with an adequate supply of drinking water.
9. The Medical Administrator, Medical Director and the Warden or designee will be apprised of the inmate's health condition on a daily basis.
10. If it is determined that the inmate's life or permanent health status may be affected without medical intervention the Medical Director will be notified. Staff should attempt reasonable efforts to convince the inmate to voluntarily accept treatment.
11. In cases where refusal for care or sustenance may imminently result in loss of life or limb:

- The contracted medical department's corporate medical director, legal department, and department of Ethics and Compliance shall be notified.
- Medical will work in concert with correctional administration if it is determined that a court order is indicated to intervene on behalf of the patient.
- An external competency exam will be conducted if recommended by the psychiatrist or the court.

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<p style="text-align: center;"> CHAPTER CARE </p>	<p style="text-align: center;"> SUBJECT INFORMED CONSENT AND RIGHT TO REFUSE TREATMENT </p>		
<p style="text-align: center;"> # PAGES 5 </p>	<p style="text-align: center;"> POLICY 300-14 </p>	<p style="text-align: center;"> EFFECTIVE DATE JANUARY 1, 2015 </p>	<p style="text-align: center;"> REPLACES OCTOBER 2010 </p>

I. POLICY

It is the policy of the Erie County Department of Corrections and its Medical and Mental Health provider(s) that examinations, treatments and procedures are governed by informed consent practices applicable in the State of Pennsylvania. In the case of minors, the informed consent of a parent, guardian, or a legal custodian applies when required by law. When health care is rendered against an inmate's will, it will be done in accordance with applicable state and federal laws and regulations.

II. REFERENCE

PA Code, Title 37, Chapter 95; Minors' Consent Act, 35 P.S. §10101 and §10103, Minors' Consent Act 71 P.S. § 1690; Mental Health Procedures Act, 50 P.S. § 7101 and §7103; A.C.A. 4-ALDF 4D-15; ECDOD Policy 300-01, Mental Health Care

III. GENERAL INFORMATION

In Pennsylvania, a juvenile/minor is defined as an individual under the age of eighteen. Under Pennsylvania's Minor Consent Act, a minor can authorize some medical testing and treatment without parental consent. The Mental Health Procedures Act and the amended Minor's Consent Act, as amended by Act 147, governs the consent requirements for mental health treatment for minors. A mentally competent adult has the constitutional right to refuse any medical, dental and/or mental health care, including the direction that life-saving or other extraordinary measures be withdrawn in terminal cases. (*Cruzan v. Missouri Department of Health*, 497 U.S.261, 110S.Ct.2841-1990). Informed consent standards of the jurisdiction are observed and documented for inmate care in a language understood by the inmate.

IV. PROCEDURE

A. Obtaining Consent for Minors

1. A physician can provide medical, dental and health care services to minors of any age without the consent of the parent or legal guardian where the physician determines that an attempt to secure consent would increase the risk to the minor's life or health.
2. Juvenile/minor's can consent to medical, dental, and health services for himself/herself when:
 - Graduated from high school.
 - Has married.
 - Has been pregnant (the statute does not require that the minor has actually given birth).
 - Has received a judicial decree of emancipation from the Court of Common Pleas where s/he resides.
 - Testing and treating for known reportable diseases in Pennsylvania.
 - Testing and treating for any venereal or sexually transmitted diseases, and any medical and health services to treat the disease.
 - Testing for pregnancy, and medical and health services to treat pregnancy, including prenatal care. (Does not include abortion services. The state's Abortion Control Act governs a minor's ability to obtain abortion services.)
 - Suffering from the use of a controlled or harmful substance.
3. Authorization for medical care of a minor shall be obtained via phone consent from a parent or legal guardian. Authorized medical staff members (Health Systems Administrator, Registered Nurses, Licensed Practical Nurses, and Physicians) will obtain verbal consent from a parent or legal guardian for treatment of a minor. All consents via phone are witnessed by a second medical staff member. This process is completed after the receiving screening by a licensed staff member.
4. A juvenile/minor who is fourteen years of age or older can consent to mental health services for himself/herself. The minor's parent's or legal guardian's consent shall not be necessary for mental health examination and treatment. The consent must be voluntary and in writing, and obtained after the minor is given an explanation of the prospective treatment and his/her rights by the mental health provider.

5. A parent or legal guardian of a minor less than eighteen years of age may consent to mental health examination or treatment on behalf of the minor, and the minor's consent shall not be necessary.
6. A minor may not abrogate consent provided by a parent or legal guardian on the minor's behalf, nor may a parent or legal guardian abrogate consent given by the minor on his or her own behalf.

B. Obtaining Consent for Adults

1. Authorization for medical or mental health care for adults shall be obtained via signature from the inmate during the initial "receiving screening" after admission to the prison. This consent form shall be placed in the inmate's medical file. A staff member will witness the inmate's signature.
2. If there is a concern about the inmate's decision-making capacity, an evaluation is done by the Physician and/or Psychiatrist.
3. Mentally competent inmates approaching the end of life are permitted to execute advance directives, living wills, health care proxies and/or DNR's (Do Not Resuscitate) orders when provided with sufficient and appropriate information to make voluntary and informed decisions.
4. The informed consent of a next of kin, guardian or legal custodian is required by law when the inmate can no longer make the informed consent regarding his/her delivery of care.
5. Invasive procedures or any treatment where there is a risk and benefit to the inmate, informed consent is documented on a written form containing the signatures of the patient and health services staff witness. Inmates will be given information necessary to give informed consent prior to initiation of a treatment, examination or procedure.
6. Consents are obtained for the following procedures:
 - On-site surgical procedures (I&D's)
 - Invasive procedures such as wart removal, in-grown toenail removal.
 - Sutures
 - Extractions of teeth
7. Consents for off-site procedures are obtained by and are the responsibility of the off-site provider or consultant.

8. The physician can provide emergency services or approve emergency care, use of protocols and subsequent referral to emergency services to those individuals in imminent danger of loss of life or limb.
9. Exceptions to obtaining informed consent must be in accordance with state and federal laws and regulations. Examples of such exceptions are:
 - An emergency which requires immediate medical intervention for safety of the inmate
 - Emergency care involving inmates who do not have the capacity to understand the information given
 - Public health matters such as a communicable disease treatment

C. Procedure for Refusal of Services

1. The patient does not waive his or her right to subsequent health care by refusing treatment at a particular time.
2. Any health evaluation or treatment refusal is documented and should include the following:
 - Description of the nature of the service being refused.
 - Evidence that the inmate has been made aware of any consequences to his or her health that may occur as a result of the refusal.
 - The signature of the patient.
 - The signature of a health service staff witness with the date and time noted.
3. If the patient does not sign the refusal form, a notation of the refusal to sign is documented. Two witnesses sign, date and time the patient's form. The witnesses will include at least one qualified health care professional, and either a correctional officer or another medical staff member.
4. In cases where there is a concern about decision making capacity or in cases where a refusal of care may result in potentially serious consequences the patient will be evaluated on an ongoing basis as clinically indicated. The purpose is to educate and reinforce the benefits of care, the risks of refusing care, and to keep the patient appraised of his/her health status and the likely consequences of change or deterioration.

5. In cases where refusal for treatment may pose a threat to the patient or others, medical staff will coordinate with correctional staff to facilitate a move to appropriate housing for observation and/or isolation.
6. In cases where refusal of care results in imminent danger of loss of life or limb:
 - The contracted corporate medical director, legal department, and department of Ethics and Compliance shall be notified.
 - Medical will work in concert with correctional administration if it is determined that a court order is indicated to intervene on behalf of the patient.
 - An external competency exam will be conducted if recommended by the psychiatrist or the court.

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<p style="text-align: center;"> CHAPTER SECURITY </p>	<p style="text-align: center;"> SUBJECT CONTRABAND CONTROL </p>		
<p style="text-align: center;"> # PAGES 5 </p>	<p style="text-align: center;"> POLICY 220-01 </p>	<p style="text-align: center;"> EFFECTIVE DATE JANUARY 1, 2015 </p>	<p style="text-align: center;"> REPLACES OCTOBER 2009 </p>

I. POLICY

It is the policy of the Erie County Department of Corrections to detect and deter the introduction, fabrication, possession and conveyance of contraband in the institution.

II. REFERENCE

A.C.A. 4-ALDF-2C-01; Title 37 § 95.241; Pennsylvania Department of Corrections

III. DEFINITION

Contraband: Any item or articles possessed by individuals or found on prison property, which is declared illegal or not specifically approved for staff or inmate possession; or an approved item or article not being used as intended; altered from its original condition; or in excess amounts; or items belonging to an inmate found in possession of another inmate.

Classes of Contraband:

1. "Evidence Contraband": Any item or article which is collected and preserved for possible disciplinary action or criminal prosecution. This classification includes but is not limited to the following: Firearms, records, documents, explosive materials, knives, clubs, pornography, unauthorized tools, hazardous/poisonous chemicals, drugs, drug paraphernalia or controlled substances/narcotics except those authorized by the medical policy, intoxicants, tobacco products, lighters, weapons used to cause bodily harm or damage, or any item or article, which can be used to facilitate an escape, etc.
2. "Money/Valuable Contraband": Any form of currency or any item or article that may have monetary value. This classification includes but is not limited to the following: Coins, checks, money orders, gambling devices, watches, rings, neck chains, etc.

3. "Nuisance Contraband": Any item or article that an inmate may have in excess of the issued or authorized amounts. This classification includes but is not limited to the following: Clothing, food, bathroom tissue, letters, magazines, photos, etc.

- **It should be noted; any item considered contraband may be placed in any classification depending upon circumstances.**

IV. GENERAL INFORMATION

No inmate, employee or any other person shall bring into or cause to be brought into or upon the property of the prison or given to any inmate any article that meets the definition of contraband or which has not been approved by the Officer-In-Charge. Person's intentionally and willfully bringing contraband into the prison or giving contraband to an inmate can be disciplined and/or prosecuted. No inmate, employee or any other person shall take any article from the prison, except personal property without the approval from the Warden or Deputy Warden(s). Inmate, employee or any other person's person or property inside the prison are subject to search at any time.

The Erie County Department of Corrections will also employ a system to ensure the proper handling of "Evidence Contraband" which is not addressed in this policy. (See Collection and Preservation of Evidence Contraband Policy).

V. PROCEDURE

A. Discovery of "Evidence Contraband"

1. Staff will immediately confiscate all contraband upon discovery. If it appears that the contraband can be classified as "Evidence Contraband" the items or property will immediately be turned over to the Deputy Warden of Security, or in his absence, the O.I.C. for proper disposition.
2. Staff confiscating the contraband will:
 - a. Complete "Receipt for Contraband/Property" form.
 - b. File a misconduct report if the contraband was found in the possession of an inmate or in an inmate's cell.
 - c. If the contraband needs to be identified in a court of law, mark it for identification. (The markings should include the initials of the staff member confiscating the contraband and the date and time. The markings should be placed in the area least likely to affect the physical appearance or monetary value of the item

or property. If this is not possible, the item or property will be sealed in an evidence bag/envelope and markings placed thereon).

- d. If the possession of the contraband cannot be established or if the contraband found in the possession of anyone other than an inmate an information report will be filed.
- e. Turn all reports and all items or property over to the Deputy Warden of Security or in his absence, the O.I.C.

3. The Deputy Warden of Security or O.I.C. will:

- a. Determine the classification of contraband.
- b. In the presence of the discovering staff member, seal the contraband in an evidence bag/envelope and properly label the bag/envelope with the following information.
 - Name of the person who was in possession of the contraband, if applicable.
 - Exactly where the contraband was found.
 - Name of the person who found the contraband.
 - Time and date the contraband was found.
 - Name of all persons who handled the contraband (establishing the chain of custody).
- c. Insure that a misconduct report if filed is used as evidence in an inmate disciplinary hearing.
- d. If the possession of the contraband cannot be established or if the contraband is found in the possession of anyone other than an inmate, insure that a completed general information report is filed.
- e. Collect and attach all reports to the contraband.
- f. Properly store or dispose of the contraband, if applicable.
- g. If further investigation is needed, initiate the investigation.

B. Discovery of "Money/Valuable Contraband"

- 1. Staff will immediately confiscate all contraband upon discovery.
- 2. Staff confiscating the contraband will:

- a. If the contraband is to be used as evidence for criminal prosecution, the contraband will be placed in an evidence bag/envelope and labeled as per section A of this policy.
- b. If the contraband is found in the mail, it generally will be disposed of by crediting the money to an inmate's account or in the instance of personal checks, property; returning it to sender. See Mail and General Post Orders related to Mail Services Policies.
- c. When it becomes necessary to confiscate an inmate's personal property, at admission or due to a change in classification status or inmate being moved to a restricted housing unit; the staff will generate a computerized property form.
- d. When returning confiscated items to an inmate, the staff member returning the items will generate a computerized form.

C. Discovery of "Nuisance Contraband"

- 1. Staff will immediately confiscate all contraband upon discovery.
- 2. Staff confiscating the contraband will:
 - a. File the necessary reports.
 - b. Properly dispose of the contraband.

D. Staff Allowable Items

- 1. Employees found to be in possession of (or trafficking) in weapons, drugs or other controlled substances, implements of escape, or any items considered to be contraband will be subject to disciplinary action and/or detained and the matter referred to the proper law authorities.

E. Disposition of Contraband

- 1. "Evidence Contraband" will be stored in the container in the security office or evidence room.
 - a. If the evidence contraband is to be used as evidence for criminal prosecution, the contraband will be placed in an evidence bag/envelope and labeled as per Collection and Preservation of Evidence Contraband Policy.

- b. If it is dangerous, i.e. weapons, explosives, etc., it is to be stored in the armory or removed from the prison and Code Black protocol will be followed.
 - c. The Deputy Warden of Security will sort the evidence contraband when the container is full and order the proper disposal or destruction of it.
 - 2. "Money/Valuable Contraband" will be stored in the container in the security office or in the storage container or property bags located in the admission/release area.
 - a. Money contraband will be disposed of by crediting the money to an inmate's account or returning it to sender.
 - b. If an owner of the money contraband cannot be found it will be turned over to the money clerk for deposit into the commissary account.
 - c. Valuable contraband will be sorted once a year by the Deputy Warden of Security and then either auctioned off or disposed of with a witness.
 - 3. "Nuisance Contraband" will be disposed of by returning it to the proper issuing point, if the contraband is prison property.
 - a. Nuisance contraband may be deposited in trash containers that are not located in any inmate common area.
- F. Contraband items that are used for training purposes will be inventoried and stored in a secure location as determined by the Deputy Warden of Security or his designee.

<p style="text-align: center;">ERIE COUNTY DEPARTMENT OF CORRECTIONS 1618 Ash Street Erie, Pennsylvania 16503-2168</p>			
CHAPTER SECURITY	SUBJECT USE OF FORCE AND RESTRAINTS		
# PAGES 10	POLICY 210-01	EFFECTIVE DATE MAY 17, 2016	REPLACES APRIL 2015

I. **POLICY**

It is the policy of the Erie County Department of Corrections to authorize the use of force to effect compliance with the rules and regulations of the facility when other methods of control are ineffective or insufficient and only the least amount of force necessary to achieve that purpose is authorized. The use of physical force is restricted to instances of justifiable self-defense, protection of others, protection of property, and prevention of escapes, and then only as a last resort and in accordance with appropriate statutory authority. Force shall not be used as a means of punishment or revenge.

II. **REFERENCES**

PA Code Title 37, Chapter 95; Title 61 Pa C.S.A., Chapter 17 and 59; A.C.A. 4-ALDF-2B-01 to 2B-02-1 and 2B-06 & 2B-07; ECDOC Policy Transportation of Inmates (110-03); ECDOC Policy Pepperball Launcher (210-09).

III. **DEFINITION**

Deadly Force: Force which could reasonably be expected to result in death or serious bodily injury.

Force: Any action within the Force Continuum by a staff member intended to compel an inmate to act or to cease acting.

Force Continuum: A sequential order of actions beginning with the least amount of force and progressing through the degrees of force.

Instruments of Restraint: Any authorized device used to prevent escapes, prevent an inmate from injuring himself or other persons, or prevent property damage (i.e., handcuffs, flex cuffs, leg irons, waist chains, etc.).

Labor: The period of time before a birth during which contractions are of a sufficient frequency, intensity and duration to bring about effacement and progressive dilation of the cervix. The determination of when labor has commenced shall rest solely with the medical providers of the inmate.

Non-Deadly Force: Force, which could reasonably be expected not to result in death or serious bodily injury.

Postpartum: The period following delivery before an inmate has been discharged from a medical facility and/or has been cleared by ECDOC's health authority.

Restraint: Any physical hold or mechanical device used to control the movement of an inmate's body and limbs, including, but not limited to, shackles, flex cuffs, soft restraints, hard metal handcuffs, a black box, Chubb cuffs, leg irons, belly chains, a security (tether) chain or a convex shield.

Security Equipment: Any authorized device that is used by the facility staff for the control and protection of property or persons (i.e., firearms, restraint chair, oleoresin capicum, batons, shields, helmets, protective clothing, etc.).

Show of Force: The assembling of staff for a planned use of force.

Signature Marks: The results of an E.I.D. application, two or four distinct marks. The marks are not burns but rather are an irritation or chemical reaction to the electrical contact with the skin. All signature marks must be photographed or videotaped.

IV. GENERAL

Limitations for the Authorized Use of Force

- ECDOC staff shall use the least amount of force reasonably necessary to achieve the authorized purpose, and stop the use of force once control is achieved.
- The use of force shall be documented, the planned use of force videotaped, and all incidents of use of force reviewed.

V. PROCEDURES

A. Authorized Purposes Allowing for the Use of Force and Force Options

1. Use of force against an inmate is justified when the acting staff member reasonably believes such force is necessary to accomplish any of the following objectives:
 - a. The protection of self and other person(s).
 - b. The protection of property from damage or destruction.
 - c. The prevention of escape.
 - d. The recapture of an escapee.

- e. To effect compliance with rules and regulations when other methods of control have proven insufficient.
 - f. The prevention of self-inflicted harm.
2. The use of force should be applied beginning with the first level of the force continuum unless the acting staff member reasonably believes the situation requires immediate escalation to a greater degree of force.
3. **FORCE CONTINUUM:** is a sequential order of actions beginning with the least amount of force necessary and progressing through the degrees of non-deadly and deadly force. The continuum ranges from the least amount of force that can reasonably be expected to control an inmate or a situation and progresses to the maximum amount of force.
- a. **Officer Presence:** The mere presence of an officer in uniform, exhibiting an authority figure is the least amount of force to be used.
 - b. **Verbal Commands:** If the officer's presence does not abate a situation, then the officer should issue verbal commands. This is the officer's ability to communicate with key verbal skill, understand anger, answer questions, and be persuasive.
 - c. **Show Of Force/Extraction Team:** If the inmate(s) do not comply with verbal commands, after giving two chances, then the next logical progression of force should be the assembling of an extraction team (show of force) to handle the situation successfully. (See Inmate Extraction Policy)
 - d. **Control Techniques/Hands On, Oleoresin Capsicum/O.C., Electronic Immobilizing Device/E.I.D., Pepper Ball Launcher, if approved:**
 - **Control Techniques/Hands On:** Physically placing hand on an inmate in a controlling manner, to separate participants in a fight, in self-defense, and in defending staff, inmates or others, extracting a passive resistant inmate.
 - **O.C.:** Oleoresin Capsicum is a tool used to supplement control techniques allowing staff to gain/regain control of a situation when an inmate is non-compliant. Although O.C. can be utilized for many instances, it will usually be administered by a supervisor before or during a planned use of force when the inmate is being non-compliant and/or

exhibiting a weapon, exhibiting aggressive behavior etc. O.C. can also be utilized by staff as a means of self-defense or to gain compliance from an actively aggressive inmate.

- **E.I.D.:** This can also be utilized as a control technique under the situations described with the use of O.C. or in conjunction with the O.C. if one or the other is not effective.
- **Pepper Ball Launcher:** This can also be utilized as a control technique only after determining that the inmate poses a threat to the safety of themselves or others and other means of subduing the inmate are not feasible.

NOTE: Control Techniques/Hands On, O.C. and E.I.D. and the pepper ball launcher are equivalent methods of control, subject to availability under the circumstances. The four are equal, with none being considered a higher degree of force than the other.

- e. **Active Counter Measures:** Strikes against the inmate; empty hand/leg strikes, impact tool (baton) strikes to large muscle groups.
- f. **Chemical Munitions Other Than O.C.:**
 - CS: Orthochlorobenzalmalonitrile
- g. **Firearms/Deadly Force:** The use of deadly force against an inmate is justified only when the acting staff member reasonably believes such force is immediately necessary and that a lesser degree of force will be insufficient to prevent death or serious bodily harm to self or others. (See Firearms Policy)

B. Authorized Equipment for Use and Staff Responsibility

- 1. The highest-ranking official present at the incident, Lieutenant or above, is authorized to approve the issuance of authorized security equipment and instruments of restraint.
 - a. Security post orders and policy shall prescribe specific and general locations for security equipment authorized for each post and specific instructions for their use.
 - b. Handcuffs will be issued to all security staff.

- c. Beginning with Show of Force/Extraction Team on the Force Continuum and extending throughout the remainder of Force Options, authorization of the O.I.C. is required during a planned use of force.
2. A planned use of force activity (i.e. physical restraint(s)/inmate extraction, chemical agents such as use of oleoresin capsicum aerosol/pepper mace, stun devices, pepper ball launcher and/or other ECDOC approved equipment) shall be coordinated by a Captain or Lieutenant who shall:
 - a. Provide direction to staff identifying the force options and security equipment that shall be used to accomplish the objective.
 - b. Direct the application of the force needed to gain and maintain control.
 - c. Provide, if practical, staff of the same gender to be involved in the use of force.
 - d. Ensure the videotaping of incidents where use of force can be reasonably expected.
 - e. Assign video trained operators to provide complete coverage of the incident.
 - f. Initiate post-incident medical reporting and documentation procedures.
3. Secure storage arrangements for restraints, chemical agents, stun devices, batons, and firearms will be in accordance with ECDOC Policy (Armory and Security Equipment).
 - A written record shall be maintained as to the distribution of these items.
 - A documented inventory and inspection of these items shall be conducted on a weekly basis according to Policy (Armory and Security Equipment; Managerial Visits and Inspections) to determine accountability and condition.

C. Medical

1. The Medical Department shall be notified prior to any planned use of force/inmate extraction in order to:

- a. Determine whether the inmate has any medical condition that could increase the anticipated chance of injury associated with the available force options (i.e.; O.C., E.I.D.).
 - b. Determine if the assistance of a mental health professional could reduce the amount of force needed.
 - c. Be available for medical follow-up.
2. Following any use of force involving physical contact and/or control techniques the medical personnel shall provide consultation, review, and required treatment of the involved staff and inmate(s) as soon as possible. The medical staff shall complete medical reports on the results of the examination.

D. Reporting and Documentation

1. Each staff member involved in any use of force for other than routine inmate movement/escort/transport shall submit a written report (i.e., Information Reports, Misconduct Reports, Incident Reports, and Extraordinary Occurrences) to the O.I.C. These reports shall be submitted to the O.I.C. no later than the end of the staff members' tour of duty.
 - a. The O.I.C. may determine, based on circumstances (routine nature of movement/escort/transport) that written reports are not necessary from all staff.
2. Written reports and documentation must include the following:
 - a. The date and time of the incident.
 - b. The location of the incident.
 - c. An accurate and complete account of the events leading to the use of force.
 - d. An accurate and complete description of the incident and reasons for employing force.
 - e. An accurate description of the method by which force was applied, including all security equipment used.
 - f. A description of any inmate weapon, if any.
 - g. A list of all participants and witnesses to the incident.

- h. A description of any injuries to staff or inmates and medical treatment rendered, to include video and/or photographs of any injuries including "signature marks" produced from the use of any stun device.
 - i. The signature of staff member, date and time of the report.
- 3. The O.I.C. will be responsible to compile and review the package of reports on the incident. The package shall include the following:
 - a. Information Reports.
 - b. Misconduct Reports.
 - c. Extraordinary Occurrence Reports.
 - d. Medical Reports including a statement from the inmate stating how any injuries received by the inmate occurred.
 - e. Videotape; if an incident where force was used was not videotaped, a written explanation detailing the reason the video camera was not used shall be provided.
 - f. E.I.D. and pepper ball usage reports, if applicable.
 - g. Any other pertinent information to include video and/or photographs of any injuries including "signature marks."

E. Review

- 1. All use of force incidents shall be reviewed by the Deputy Warden of Security for an evaluation regarding, but not limited to:
 - a. The compliance with policy.
 - b. The need for further investigation.
 - c. The need for modification of policies.
 - d. The need for additional staff training.
 - e. The need to file an Extraordinary Occurrence Report.
- 2. Use of force information shall be documented by the Deputy Warden of Security and reported to the PA Department of Corrections as required by § 95.242 (relating to statistical/informational reporting requirements). Whenever a force incident occurs (other than routine use of restraints during inmate movement/escort/transportation)

including all instances of physical force, restraints, chemical agents, stun devices, baton, or firearm a Report of Extraordinary Occurrence shall be completed and submitted to the PA Department of Corrections.

F. Training

1. All security staff will be trained in the use of force to control inmates and the limitations on its use during basic training and annually.
2. The training shall occur before staff is assigned to a post involving the possible use of authorized equipment.
3. All prison staff authorized to use ECDOC approved equipment shall demonstrate competency in its use per the training or certification standards recommended by the manufacturer of such equipment. Competency must be documented.
4. The Training Coordinator shall establish the training programs in the use of force.
5. The Deputy Warden of Security shall ensure that an adequate number of staff is familiarized with the proper use of video equipment to record use of force incidents.

G. Outside Law Enforcement

1. Law enforcement personnel conducting official business on prison premises who have in their possession equipment or weapons(s) not permitted into the prison shall be provided a locked security area to properly secure the equipment or weapon(s) (See Entrance Procedure Policy).

H. Restraint of Pregnant Inmates

1. The medical authority provides guidance on the use of restraints on pregnant offenders prior to active labor and delivery.
2. ECDOC staff will not apply restraints to an inmate known to be pregnant during any stage of labor, any pregnancy-related medical distress, any period of delivery, any period of postpartum, or transport to a medical facility as a result of any of the preceding conditions or transport to a medical facility after the beginning of the second trimester of pregnancy.
3. Reasonable restraint may be applied if ECDOC staff assigned to supervise a pregnant inmate makes an individualized determination that the inmate presents a substantial risk of imminent flight or some other extraordinary medical or security circumstance dictates that the inmate be restrained to

ensure the safety and security of the inmate, the staff of ECDOC or medical facility, other inmates or the public.

- Leg or waist restraints shall not be used on any inmate who is in labor.
 - The type of restraint applied and the application of the restraint shall be done in the least restrictive manner possible.
4. Any deviation from the prohibition requires approval by, and guidance on, methodology from the medical authority and is based on documented serious security risks. (See B. Authorized Equipment for Use and Staff Responsibility and C. Medical, above)
 5. The application of restraints to a pregnant inmate as described in #3 above will necessitate a written report of the incident. (See D. Reporting and Documentation, above)
 - Written reports must include the circumstances that led to the determination that the inmate represented a substantial risk of imminent flight; or
 - The circumstances dictated the inmate be restrained to ensure the safety and security of the inmate, the staff of the ECDOC or medical facility, other inmates or the public.
 6. All such incidents of restraint shall constitute an incident that qualifies as an Extraordinary Occurrence that must be reported to the PA DOC in the County Extraordinary Occurrence Monthly Report.
 7. When restraint is permitted according to #3 above, ECDOC staff shall use the least restrictive restraint necessary when the facility/staff has actual or constructive knowledge that a prisoner or detainee is in the second or third trimester of pregnancy.
 - If restraint is applied, at no time shall the inmate be left unattended by correctional staff with the inability to release the restraint should a release become medically necessary.
 - The correctional staff shall immediately remove all restraints upon request of a doctor, nurse or other health care professional.
 8. A pregnant inmate not in labor or in any pregnancy-related medical distress and prior to the beginning of the second trimester of pregnancy (12 weeks or less) will be transported to medical appointments by security staff and will require wrists to be restrained by either handcuffs or flex cuffs.
 9. During delivery, security staff will remain present in the room. If the officer is not permitted to remain in the delivery room for an emergency

situation, the officer will remain outside of the room to ensure that they are present when the inmate is moved to a regular hospital room.

10. No waist chains/belts will be used on a postpartum inmate returning to ECDOC until evaluated by our medical provider and cleared.

Conditions of Confinement Worksheet
Operational Review Self-Assessment (ORSA)
Over 72-Hour IGSA Facilities
Average Daily Population of Less Than Ten Detainees



Facility Name
Erie County Department of Corrections
Address (Street and Name)
1618 Ash Street
City, State and Zip Code
Erie, Pennsylvania 16503
County
Erie
Name and title of Chief Executive Officer (Warden/OIC/Superintendent)
(b)(6),(b)(7)(C) Warden
Name and title of Facility Reviewer
(b)(6),(b)(7)(C) Warden
Date[s] of Facility Review
07/11/2017
Signature of Facility Reviewer
(b)(6),(b)(7)(C)
Field Office/Name of Field Office Director
Philadelphia (b)(6),(b)(7)(C) – (A/F)
Name and Title of Field Officer Reviewer
(b)(6),(b)(7)(C) – Deportation Officer - RIC

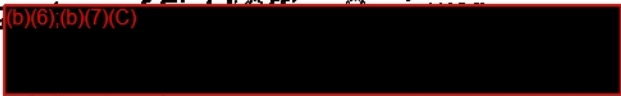
Date of Field Office Review
07/12/2017
Sig (b)(6), (b)(7)(C) 
Is a Corrective Action Plan Required?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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For each standard rated below Acceptable, facilities must attach a Plan of Action for bringing operations into compliance. Each facility should examine the entire worksheet to identify areas of improvement including those standards where an overall finding of acceptable was achieved.

Section I

Detainee Services Standards

ACCESS TO LEGAL MATERIALS

Policy: Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.

Components	Y	N	N/A	Remarks
The law library contains all materials listed in the "Access to Legal Materials" standard, Attachment A. The listing of materials is posted in the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The law library is adequately equipped with typewriter, computers or both and has sufficient supplies for daily use by the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In addition to the physical law library, ICE detainees have access to the Lexus Nexus electronic law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lexus Nexus is updated and current.
Detainees are offered a minimum 5 hours per week in the law library. <u>Detainees are not required to forego recreation time in lieu of library usage.</u> Detainees facing a court deadline are given priority use of the law library.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees are allowed to use the law library whenever they submit a request.

ACCESS TO LEGAL MATERIALS

Policy: Facilities holding ICE detainees shall permit detainees access to a law library, and provide legal materials, facilities, equipment and document copying privileges, and the opportunity to prepare legal documents.

Components	Y	N	N/A	Remarks
<input checked="checked" type="checkbox"/> Acceptable				
<input type="checkbox"/> Deficient				
<input type="checkbox"/> At-Risk				
<input type="checkbox"/> Repeat Finding				

Remarks: (Record significant facts, observations, alternate source used for verification, etc.)

(b)(6),(b)(7)(C)

Auditor

07/11/2017

ADMISSION AND RELEASE

Policy: All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
<p>In processing includes an orientation of the facility. The orientation includes:</p> <ul style="list-style-type: none"> • Unacceptable activities and behavior, and corresponding sanctions; • How to contact ICE; • The availability of pro bono legal services • How to pursue pro bono legal services. Schedule of programs. • Services and daily activities, including visitation, telephone usage, mail service, religious programs, court procedures, access to and use of the law library and the general library • Sick-call procedures, etc., and the detainee handbook. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>At this facility, detainees are provided with a video orientation before leaving the admissions and release area. Detainees are also given a copy of the facility handbook (English or Spanish) as well as a copy of the ICE National Detainee Handbook. Procedures on how to contact ICE are listed in the ICE handbook as well as being posted in the housing units.</p>
<p>Medical screenings are performed by medical staff or persons who have received specialized training for the purpose of conducting an initial health screening.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All detainees are cleared by medical staff before leaving the admissions and release area.</p>
<p>The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All Contraband found during the intake process is returned to the transporting officers. All other property/possessions are recorded/inventoried and a copy given to the detainee.</p>

ADMISSION AND RELEASE

Policy: All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Each new arrival is classified according to criminal history and threat levels. Criminal history is provided for each detainee by the ICE field office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Criminal History and Threat Levels are noted on the I-203 provided at intake.
The facility classification system includes: <ul style="list-style-type: none"> Classifying detainees upon arrival; Separating from the general population those individuals who cannot be classified upon arrival; and The first-line supervisor or designated classification specialist reviewing every classification decision. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 200-16 addresss each of the listed in this component.

ADMISSION AND RELEASE

Policy: All detainees will be admitted and released in a manner that ensures their health, safety, and welfare. The admissions procedure will, among other things include: medical screening; a file-based assessment and classification process; a body search; and a search of personal belongings, which will be inventoried, documented, and safeguarded as necessary.

Components	Y	N	N/A	Remarks
<input checked="checked" type="checkbox"/> Acceptable				
<input type="checkbox"/> Deficient				
<input type="checkbox"/> At-Risk				
<input type="checkbox"/> Repeat Finding				

Ref: (b)(6),(b)(7)(C) facts, observations, other sources used, etc.)

Aug 07/11/2017

CLASSIFICATION SYSTEM

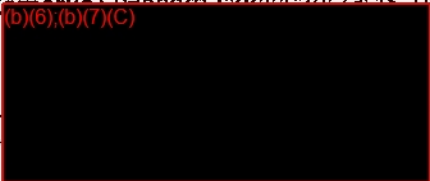
Policy: All facilities will develop and implement a system according to which ICE detainees are classified. The classification system will ensure that each detainee is placed in the appropriate category, physically separated from detainees in other categories.

Components	Y	N	N/A	Remarks
The facility has a system for classifying detainees. In CDFs and IGSAs, an Objective Classification System or similar is used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Housing assignments are based on classification-level.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In most cases, ICE detainees are initially placed in Classification Unit B unless they have been involved in disruptive behavior or have an escape history. In that case, they are placed in a more secure unit.
The classification process includes reassessment/reclassification. At IGSA's, detainees may request reassessment 60 days after arrival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee can request a reclassification at anytime. The facility has a automatic review every 180 days. Most ICE detainees are normally held at this facility for less than 2 weeks.

☒ Acceptable
☐ Deficient
☐ At-Risk
☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)



/11/2017

A

CORRESPONDENCE AND OTHER MAIL

Policy: All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning correspondence and other mail.

Components	Y	N	N/A	Remarks
The rules for correspondence and other mail are posted in each housing or common area or provided to each detainee via a detainee handbook.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A laminated information booklet is placed in each housing unit. This booklet contains information about mail procedures.
Staff maintains a written record of every item removed from detainee mail.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Every indigent detainee has the opportunity to mail, at government expense: Reasonable correspondence about a legal matter: Three one ounce letters per week: Packages deemed necessary by ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Indigent detainees are provided with four free stamped envelopes and writing paper each week, upon request.
The facility has a system for detainees to purchase stamps and for mailing all special correspondence and a minimum of 5 pieces of general correspondence per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees may purchase stamps from the commissary. The facility has no limit on the amount of mail.

CORRESPONDENCE AND OTHER MAIL

Policy: All facilities will ensure that detainees send and receive correspondence in a timely manner, subject to limitations required for the safety, security, and orderly operation of the facility. Other mail will be permitted, subject to the same limitations. Each facility will widely distribute its guidelines concerning correspondence and other mail.

The facility provides writing paper, envelopes, and pencils at no cost to ICE detainees.



Each detainee is provided a starter kit which includes writing supplies.

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

07/11/2017

Auditor

DETAINEE HANDBOOK

Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Y	N	N/A	Remarks
The detainee handbook is written in English and translated into Spanish or into the next most-prevalent Language(s).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The detainee handbook states in clear language basic detainee responsibilities.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The handbook describes the detainee disciplinary policy and procedures: Including: <ul style="list-style-type: none"> Prohibited acts and severity scale sanctions. Time limits in the Disciplinary Process. Summary of Disciplinary Process. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The grievance section of the handbook explains all steps in the grievance process – Including: <ul style="list-style-type: none"> Informal (if used) and formal grievance procedures; The appeals process; <u>In CDF facilities:</u> procedures for filing an appeal of a grievance with ICE. Staff/detainee availability to help during the grievance process. Guarantee against staff retaliation for filing/pursuing a grievance. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All sections of this component are addressed in the new facility handbook.

DETAINEE HANDBOOK

Policy: Every OIC will develop a site-specific detainee handbook to serve as an overview of, and guide to, the detention policies, rules, and procedures in effect at the facility. The handbook will also describe the services, programs, and opportunities available through various sources, including the facility, ICE, private organizations, etc. Every detainee will receive a copy of this handbook upon admission to the facility.

Components	Y	N	N/A	Remarks
<ul style="list-style-type: none"> How to file a complaint about officer misconduct with the Department of Homeland Security. 				
The detainee handbook describes the medical sick call procedures for general population and segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The handbook specifies the rights and responsibilities of all detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)


 07/11/2017
 Auditor's Signature / Date

FOOD SERVICE				
Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.				
Components	Y	N	N/A	Remarks
The food service program is under the direct supervision of a <u>professionally trained</u> and certified service administrator. Responsibilities of cooks and cook foremen are in writing. The Food Service Administrator (FSA) determines the responsibilities of the Food Service Staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FSA (Food Service Administrator) has 19 years of service and is ServSafe certified.
Detainees are served at least two hot meals every day. No more than 14 hours elapse between the last meal served and the first meal of the following day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meals times are as follows: Breakfast 0530, Lunch 1045 and Dinner 0430.
Knife cabinets close with an approved locking device and the on-duty cook foreman maintains control of the key that locks the device.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Cook Supervisor or FSA maintains control of the key.
All knives not in a secure cutting room are physically secured to the workstation and staff directly supervise detainees using knives at these workstations. Staff monitor the condition of knives and dining utensils	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All knives in use are physically secured to a worktable and all workers are directly supervised by food service staff.

FOOD SERVICE				
Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.				
Components	Y	N	N/A	Remarks
The food service program addresses medical diets.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special medical diets are ordered and coordinated with food service staff through the medical staff.
The food service staff instructs detainee volunteers on: <ul style="list-style-type: none"> a. Personal cleanliness and hygiene. b. Sanitary techniques for preparing, storing, and serving food, and c. The sanitary operation, care, and maintenance of equipment. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standard operating procedures include weekly inspections of all food service areas, as well as dining and food preparation areas and equipment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FSA conducts weekly inspections of all food service areas.
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspection is performed by the FSA or a Food Service Supervisor.

FOOD SERVICE				
Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.				
Components	Y	N	N/A	Remarks
A registered dietitian conducts a complete nutritional analysis of every master-cycle menu planned.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The Cook Foreman has the authority to change menu items if necessary. <ul style="list-style-type: none"> If yes, documenting each substitution, along with its justification With copy to FSA 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The food services supervisor has the authority to make menu substitutions and documents such substitutions.
A common-fare menu available to detainees whose dietary requirements cannot be met on the main. <ul style="list-style-type: none"> Changes to the planned common-fare menu can be made at the facility level. Hot entrees are offered three times a week. The common-fare menus satisfy nutritional recommended daily allowances (RDAs). Staff routinely provides hot water for instant beverages and foods. Common-fare meals are served with: <ul style="list-style-type: none"> Disposable plates and utensils. Reusable plates and utensils. Staff use separate cutting boards, knives, spoons, scoops, etc., to prepare the common-fare diet items. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The common-fare program accommodates detainees abstaining from particular foods or fasting for religious purposes at prescribed times of the year. <ul style="list-style-type: none"> Muslims fasting during Ramadan receive their meals after sundown. Jews who observe Passover but do not participate in the Common-Fare 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

FOOD SERVICE

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
<p>Program receive the same Kosher-for-Passover meals as those who do participate.</p> <ul style="list-style-type: none"> Main-line offerings include one meatless meal (lunch or dinner) on Ash Wednesday and Fridays during Lent. 				
<p>Hot and cold foods are maintained at the prescribed, "safe" temperature(s) as served.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Final end cooking temperatures are documented.
<p>All meals provided in nutritionally adequate portions.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Everyone working in the food service department complies with food safety and sanitation requirements.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

FOOD SERVICE

Policy: Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.

Components	Y	N	N/A	Remarks
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment. • who conducts the inspections?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The FSA conducts weekly inspections of all food service areas.
Standard procedure includes checking and documenting temperatures of all dishwashing machines after each meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temperture logs reflect consistent recordings within a acceptable range.
Staff documents the results of every refrigerator/ freezer temperature check.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records show readings within a acceptable range.
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

(b)(6),(b)(7)(C)

07/11/2017

Auditor's S

FUNDS AND PERSONAL PROPERTY

Policy: All facilities will implement procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property.

☐ **Standard NA: (IGSA ONLY)** Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Y	N	N/A	Remarks
Detainee funds and valuables are properly separated and stored away. Detainee funds and valuables are accessible to designated supervisor(s) only	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff itemizes the baggage and personal property of arriving detainees (including funds and valuables). <u>For IGSA's and CDFs</u> , using a personal property inventory form that meets the ICE standard?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal Property Form meets ICE standards.
Staff forwards an arriving detainee's medication to the medical staff.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

FUNDS AND PERSONAL PROPERTY

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☐ **Standard NA: (IGSA ONLY)** Check this box if all ICE detainee Funds, Valuables and Property are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Staff follows written procedures when returning property to detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility disposes of abandoned property in accordance with written procedures. If a CDF/IGSA facility, written procedure requires the prompt forwarding of abandoned property to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All abandoned property is forwarded to ICE.

☒ **Acceptable**

 ☐ **Deficient**

 ☐ **At-Risk**

 ☐ **Repeat Finding**

Remarks: (b)(6),(b)(7)(C) observations, other sources used, etc.)

Auditor: [REDACTED] /11/2017

GROUP LEGAL RIGHTS PRESENTATIONS

Policy: Facilities housing ICE detainees shall permit authorized persons to make presentations to groups of detainees for the purpose of informing them of U.S. Immigration law and procedures, consistent with the security and orderly operation of each facility. ICE encourages such presentations, which instruct detainees about the immigration system and their rights and options within it.

☒ Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.

Components	Y	N	N/A	Remarks
Staff permits presenters to distribute ICE-approved materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Interpreters are admitted when necessary to assist attorneys and other legal representatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Presenters are permitted to meet with small groups of detainees to discuss their cases after the group presentation. ICE or authorized detention staff is present but do not monitor conversations with legal providers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

GROUP LEGAL RIGHTS PRESENTATIONS

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☒ Check here if No Group Presentations were conducted within the past 12 months. Mark Standard as Acceptable overall and continue on with next portion of worksheet.

Components	Y	N	N/A	Remarks
Posters announcing presentations appear in common areas at least 48 hours in advance and sign-up sheets are available and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility plays ICE-approved videotaped presentations on legal rights at regular opportunities, at the request of outside organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A copy of the Group Legal Rights Presentation policy, including attachments, is available to detainees upon request.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☐ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks: (b)(6), (b)(7)(C) [Redacted] observations, other sources used, etc.)

Auditor: [Redacted] 1/2017

DETAINEE GRIEVANCE PROCEDURES

Policy: Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

Components	Y	N	N/A	Remarks
<p>Written procedures provide for the informal resolution of oral grievances (Not mandatory).</p> <ul style="list-style-type: none"> If yes, the detainee has up to five days within which to make his/her concern known to a member of the staff. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Informal/oral grievances are handled by a consolor or a CO.
<p>Detainees have access to the grievance committee (or equivalent in IGSA), using formal procedures.</p> <ul style="list-style-type: none"> Detainees may seek help from other detainees or facility staff when preparing a grievance. Illiterate, disabled, or non-English-speaking detainees receive special assistance when necessary. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Formal grievances are settled by a Captain.
<p>Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

DETAINEE GRIEVANCE PROCEDURES

Policy: Every facility will develop and implement standard operating procedures (SOPs) for addressing detainee grievances in timely fashion. Each step in the process will occur within the prescribed time frame. Among other things, a grievance will be processed, investigated, and decided (subject to appeal) in accordance with the SOPs; a grievance committee will convene as provided in the SOPs. Standard procedure will include providing the detainee with a written response to any formal grievance, which will include the basis for the decision. The facility will also establish standard procedures for handling emergency grievances. All grievances will receive supervisory review. Reprisal against the filer of a grievance will not be tolerated.

Components	Y	N	N/A	Remarks
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodges a complaint. If yes, explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks: (b)(6),(b)(7)(C) observations, other sources used, etc.)

Audit Date: 7/11/2017

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS

Policy: ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.

Components	Y	N	N/A	Remarks
<p>The facility has a policy and procedure for the regular issuance and exchange of clothing, bedding, linens and towels.</p> <ul style="list-style-type: none"> The supply of these items exceeds the minimum required for the number of detainees 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy # 310-02 address this component.
<p>All new detainees are issued clean, temperature-appropriate, presentable clothing during in-processing. Detainees receive:</p> <ul style="list-style-type: none"> One uniform shirt and one pair of uniform pants, or one jumpsuit; One pair of socks; One pair of underwear (Daily change); and <p>One pair of facility-issued footwear.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees receive the quantities identified in this component.
<p>Additional clothing is available for changing weather conditions, or as seasonally appropriate.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>New detainees are issued clean bedding, linens, and towels. They receive at a minimum:</p> <ul style="list-style-type: none"> One mattress; One blanket; Two sheets; One pillowcase; One towel; and Additional blankets are issued based on local weather conditions. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE detainees receive the quantities identified in this component.

ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS				
Policy: ICE requires that all facilities housing ICE detainees provide clean clothing, bedding, linens and towels to every ICE detainee upon arrival. Further, facilities shall provide ICE detainees with regular exchanges of clothing, linens, and towels for as long as they remain in detention.				
Components	Y	N	N/A	Remarks
Detainees are provided clean clothing, linen and towels. <ul style="list-style-type: none"> • Socks and undergarments - exchanged daily. • Outer garments - twice weekly. • Sheets - weekly. • Towels - weekly. • Pillowcases - weekly. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding </div>				

Remarks: (b)(6),(b)(7)(C) observations, other sources used, etc.)

Audited: 7/11/2017

MARRIAGE REQUESTS			
Policy: All detainee marriage requests will receive case-by-case consideration from ICE management.			
Components	Y	N	N/A
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding			

Remarks: (Record significant facts, observations, other sources used, etc.)

Auditor's (b)(6),(b)(7)(C) 07/11/2017

NON-MEDICAL EMERGENCY ESCORTED TRIPS

Policy: The Immigration and Customs Enforcement (ICE) may provide detainees with staff-escorted trips into the community for the purpose of visiting critically ill members of the detainee's immediate family, or for attending funerals.

☒ **Standard NA:** Check this box if all ICE Non-Medical Emergency Escorted Trips are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Y	N	N/A	Remarks
Each escort detail includes at (b)(7)(E)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(b)(7)(E)				
The IGSA facility notifies ICE of all detainee requests for non-medical escorts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☐ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks (b)(6);(b)(7)(C) (b)(6);(b)(7)(C) observations, other sources used, etc.)

Auditor's (b)(6);(b)(7)(C) 1/2017

RECREATION				
Policy: It is ICE policy to provide access to recreational programs and activities to all ICE detainees, to the extent possible, under conditions of security and supervision that protect their safety and welfare.				
Components	Y	N	N/A	Remarks
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility provides detainees in the SHU at least one hour of outdoor recreation time daily, five times per week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in disciplinary/administrative segregation receive a written explanation when a panel revokes his/her recreation privileges.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees have access to recreation activities outside the housing units for at least one hour daily, 5 days a week.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recreation is available during any out of cell time, seven days a week.

☒ If outdoor recreation is offered check this box. No further information is required when outdoor recreation is offered.

RECREATION

Policy: It is ICE policy to provide access to recreational programs and activities to all ICE detainees, to the extent possible, under conditions of security and supervision that protect their safety and welfare.

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

(b)(6),(b)(7)(C)

07/11/2017

Auditor's Si

RELIGIOUS PRACTICES

Policy: Facilities will provide ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

Components	Y	N	N/A	Remarks
Detainees are allowed to engage in religious services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Covered under policy 420-06.
Each detainee is allowed religious items in his/her immediate possession.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Religious books such as the Holy Bible and the Holy Quran are allowed. Rugs used by the Muslim faith are also permitted. Other items on a case by case basis.
The facility allows detainees to observe the major "holy days" of their religious faith. List any exceptions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
☐ Deficient
☐ At-Risk
☐ Repeat Finding

Remarks: (b)(6),(b)(7)(C) [redacted], other sources used, etc.)

Auditor's

DETAINEE TELEPHONE ACCESS				
Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.				
Components	Y	N	N/A	Remarks
Detainees are allowed access to telephones during established facility waking hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Telephones are provided at a minimum ratio of one telephone per 25 detainees in the facility population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The number of telephones in the units far exceeds the minimum 1:25 ratio. The ratio is approx. 1:10.
Access rules are posted in housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each unit has a laminated information booklet that includes telephone access rules.
Telephones are inspected regularly by facility staff to ensure that they are in good working order.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

DETAINEE TELEPHONE ACCESS				
Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.				
Components	Y	N	N/A	Remarks
The facility provides the detainees with the ability to make non-collect (special access) calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The OIG phone was accessible through the detainee telephone system.
Special Access calls are at no charge to the detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each telephone has a posting stating that the phone calls are monitored.

DETAINEE TELEPHONE ACCESS				
Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.				
Components	Y	N	N/A	Remarks
No restrictions are placed on detainees attempting to contact attorneys and legal service providers who are on the approved "Free Legal Services List".	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees are allowed to return emergency phone calls as soon as possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The shift commander or consular makes arrangements for detainees to return emergency phone calls at no charge.
Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in disciplinary segregation are allowed phone calls relating to the detainee's immigration case or other legal matters, including consultation calls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	


DETAINEE TELEPHONE ACCESS

Policy: All facilities housing ICE detainees will permit detainees' reasonable and equitable access to telephones.

Components	Y	N	N/A	Remarks
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees in disciplinary segregation are allowed phone calls for family emergencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks: (b)(6),(b)(7)(C) , observations, other sources used, etc.)

Auditor's Signature:  07/11/2017

VISITATION				
Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.				
Components	Y	N	N/A	Remarks
There is a written visitation schedule and hours for general visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visitation schedule is posted in public areas and is accessible on the facility website. Detainees receive information in the facility handbook, the orientation and in the laminated information booklet located in the housing unit.
The visitation schedule and rules are available to the public.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The visiting rules are posted in the public access area of the facility. There is also an ongoing video presentation in the visitor's lobby providing visitors with information regarding visits, funds, telephones, etc.
The hours for all categories of visitation are posted in the visitation waiting area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal visitation is available seven (7) days a week, including holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VISITATION

Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.

On regular business days legal visitation hours provide for a minimum of eight (8) hours per day and a minimum of four hours per day on weekends and holidays.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attorneys are allowed to visit all day except during count times unless arrangements are made in advance.
A general visitation log is maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
On regular business days, detainees are given the option of continuing a meeting with a legal representative through a scheduled meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal visits are normally terminated during meal periods, with the option of resuming after the meal. If an attorney makes a request, due to pending deadlines, to meet through meals, the request will be reviewed and a decision made on a case by case basis or if arrangements are made in advance.
Private consultation rooms are available for attorney meetings. There is a mechanism for the detainee and his/her representative to exchange documents.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VISITATION				
Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.				
Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The current list of pro bono legal organizations is posted in the detainee housing areas and other appropriate areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When strip searches are required after every contact visit with a legal representative, the facility provides an option for non-contact visits with legal representatives.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Strip searches are not required after visits with legal representatives.
Provisions for NGO visitation as stated in the Detention Standards are complied with.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VISITATION				
Policy: ICE shall permit detainees to visit with family, friends, legal representatives, special interest groups and the news media.				
Detainees in special housing afforded visitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standard inmates are given 1 hour. Max inmates are given 40 minutes and SHU inmates are given 20 minutes.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Re: (b)(6), (b)(7)(C) [redacted] facts, observations, other sources used, etc.)

At: [redacted] 07/11/2017

VOLUNTARY WORK PROGRAM

Policy: In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.

☒ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

Components	Y	N	N/A	Remarks
Detainees have the opportunity to participate in special details, however, are never allowed to work outside the secure perimeter.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical staff screen and formally certifies detainee food service volunteers; <ul style="list-style-type: none"> • Before the assignment begins • As a matter of written procedure 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written procedures govern selection of detainees for the Voluntary Work Program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VOLUNTARY WORK PROGRAM

Policy: In every facility offering a voluntary work program, ICE detainees will have the opportunity to work and earn money by participating. While not legally required, ICE affords detainee workers basic Occupational Safety and Health Administration (OSHA) protections.

☒ Check here if ICE detainees are not authorized to work at the IGSA facility. Mark NA on Form G-324A, page 3 and move to next section.

The facility complies with work-hour requirements for detainees, not exceeding: <ul style="list-style-type: none"> Eight hours a day. Forty hours a week. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees receive safety equipment/ training sufficient for the assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper procedure is followed when an ICE detainee is injured on the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☐ Acceptable
☐ Deficient
☐ At-Risk
☐ Repeat Finding

Remarks (If need significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

07/11/2017

Audit

Section II

Health Services Standards

HUNGER STRIKES

Policy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Components	Y	N	N/A	Remarks
When a detainee has refused food for 72 hours, it is standard practice for staff to refer him/her to the medical department.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stated in policy 120-13.
CDFs and IGSAs immediately report a hunger strike to the ICE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff will report a detainee on hunger strike to the warden or his designee who will in turn notify ICE.
The facility has established procedures to ensure staff respond immediately to a hunger strike.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Policy and procedure require that staff isolate a hunger-striking detainee from other detainees. If yes, in an observation room?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees who are on hunger strike are placed in a segregation cell and are monitored.

HUNGER STRIKES

Policy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Medical staff records the weight and vital signs of a hunger-striking detainee at least once every 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A signed Refusal of Treatment form is required of every detainee who rejects medical evaluation or treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
During a hunger strike, staff document and provide the hunger-striking detainee three meals a day.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff maintains the hunger striker's supply of drinking water/other beverages.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

HUNGER STRIKES

Policy: All facilities will follow standard guidelines for the medical and administrative management of ICE detainees engaging in hunger strikes. By monitoring of the health and welfare of the individual detainees, facilities will strive to sustain their lives.

Staff is directed to record the hunger striker's fluid intake and food consumption; Does staff always use Hunger Strike Monitoring Form I-839 or similar IGSA form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff documents all treatment attempts, including attempts to persuade hunger striker of medical risks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical staff provide information to the detainee about the adverse risks and impacts if a hunger strike continues.
The medical staff has written procedures for treating hunger strikers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy Number 120-13
Staff has received training in identification of hunger strikes. Medical staff receives early training in hunger-strike evaluation and treatment. Staff remain current in evaluation and treatment techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional and medical staff participate in annual education courses on hunger strikes.

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks: *(Record significant facts, observations, other sources used, etc.)*

(b)(6),(b)(7)(C)

Auditor

07/11/2017

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

Components	Y	N	N/A	Remarks
Facilities operate a health care facility in compliance with State and Local laws and guidelines.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility's in-processing procedures for arriving detainees include medical screening.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All detainees receive a comprehensive medical screening upon admission to the facility.

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

All detainees have access to and receive medical care.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Medical records are kept apart from other files. They are:</p> <ul style="list-style-type: none"> • Secured in a locked area within the medical unit; • With physical access restricted to authorized medical staff; and • Procedurally, no copies made and placed in detainee files. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medical records are maintained within the medical administration office. Access is limited to medical staff. EMR (Electronic Medical Records) system has been newly introduced at the facility.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>The medical staff is large enough to provide, examine, and treat the facility's detainee population.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Where staff is used to distribute medication, a health care provider properly trains these officers.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Only licensed medical staff distribute medications.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>Detention staff is trained to respond to health-related emergencies within a 4-minute response time.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Security staff serve as first responders. Medical staff are able to respond to medical emergencies in less than 2 minutes. Drills occur on a monthly basis.</p>
<p>The medical unit keeps written records of medication that is distributed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>A Individual Medication Administration Record is established and maintained for each detainee.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>Detainee's medical records or a copy thereof, are available and transferred with the detainee.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Medical screening includes a Tuberculosis (TB) test</p> <ul style="list-style-type: none"> ▪ Every arriving detainee receives a TB test. ▪ During the admission process. ▪ Detainee's TB-screening does not occur more than one business day after his/her arrival at the facility. ▪ Detainees not screened are housed separate from the general population. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Detainees are housed in the classification unit until the medical clearance is complete.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>All detainees receive a mental-health screening upon arrival. It is conducted:</p> <ul style="list-style-type: none"> • By a health care provider or specially trained officer; • Before a detainee's assignment to a housing unit. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>The health care provider physically examines/assesses arriving detainees within 14 days of admission/arrival at the facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>Detainees in the Special Management Unit have access to health care services.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Nursing staff visit the special management unit during medication administration sessions. A nurse also makes a cell to cell visit every day. Complete physicals occur every 30 days for inmates in the SMU.</p>
<p>Staff provides detainees with health- services (sick call) request slips daily, upon request.</p> <ul style="list-style-type: none"> Request slips are available in the languages other than English, including every language spoken by a sizeable number of the facility's detainee population. Service-request slips are delivered in a timely fashion to the health care provider. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Sick call slips are provided in English and Spanish.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

<p>The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Medical services are provided on-site 24 hours a day, 7 days a week. Staff have on-call access to a physician, the health services administrator and a psychiatrist.</p>
<p>Detention staff is trained to respond to health-related emergencies within a 4-minute response time.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Security staff serve as first responders. Medical staff are able to respond to medical emergencies in less than 2 minutes.</p>

ACCESS TO MEDICAL CARE

Policy: Every facility will establish and maintain an accredited/accreditation-worthy health program for the general well-being of ICE detainees.

A signed and dated consent form is obtained from a detainee before medical treatment is administered.



Medical records are placed in a sealed envelope or other container labeled with the detainee's name and A-number and marked "MEDICAL CONFIDENTIAL".



☒ **Acceptable**

☐ **Deficient**

☐ **At-Risk**

☐ **Repeat Finding**

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6);(b)(7)(C)

2017

Auditor's Sig

SUICIDE PREVENTION AND INTERVENTION				
Policy: All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.				
Components	Y	N	N/A	Remarks
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correctional officers and medical staff attend continuing education courses that are scheduled annually to maintain their knowledge and skills concerning suicide prevention.
Training prepares staff to: <ul style="list-style-type: none"> Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; Understand and apply suicide-prevention techniques. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Pennsylvania Department of Corrections curriculum as well as an internal curriculum for Suicide Prevention and Intervention are used for training of staff.
A health-care provider or specially trained officer screens all detainees for suicide potential as part of the admission process. <ul style="list-style-type: none"> Screening does not occur later than one working day after the detainee's arrival. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nursing staff are trained to make an initial assessment of the potential for suicide ideation and refer at-risk ICE detainees to medical and/or mental health staff for follow up.
Written procedures cover when and how to refer at-risk detainees to medical staff and procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SUICIDE PREVENTION AND INTERVENTION				
Policy: All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.				
Components	Y	N	N/A	Remarks
The facility has a designated isolation room for evaluation and treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The medical area has 3 designated isolation cells, 2 of which have cameras. There are also 4 designated cells in housing units with cameras to support the observation of a detainee.
The designated isolation room does not contain any structures or smaller items that could be used in a suicide attempt.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical staff has approved the room for this purpose.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff observes and documents the status of a suicide-watch detainee at least once every 15 minutes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A detainee on suicide watch may be observed constantly at the beginning of a watch and then reduced to 15 minute intervals, as prescribed by the medical/psychiatric staff.

SUICIDE PREVENTION AND INTERVENTION

Policy: All detention staff working with ICE detainees will be trained to recognize suicide-risk indicators. Staff will handle potentially suicidal individuals with sensitivity, supervision, and referrals. A clinically suicidal detainee will receive preventive supervision and treatment.

Components	Y	N	N/A	Remarks
<div style="display: flex; justify-content: space-around; align-items: center;"> <input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding </div>				

Remarks: (b)(6);(b)(7)(C) [Redacted] facts, observations, other sources used, etc.)

Auditor: [Redacted] 07/11/2017

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Y	N	N/A	Remarks
<p>The facility or appropriate ICE office promptly notifies the next-of-kin of the detainee's: medical condition.</p> <ul style="list-style-type: none"> The detainee's location. The visiting hours and rules at that location. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's warden or his designee notify the ICE representative concerning the medical condition of an ICE detainee. The ICE representative notifies the next of kin.
<p>Detainees who are chronically or terminally ill are transferred to an appropriate offsite medical facility.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If warranted, the ICE detainee will be transferred to a local hospital or to an ICE facility that can provide appropriate medical care.
<p>There is a policy addressing "Do Not Resuscitate Orders"</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 300-14

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

Policy: All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Y	N	N/A	Remarks
Detainees with a "Do Not Resuscitate" order in the medical record receive maximal therapeutic efforts short of resuscitation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility notifies the DIHS Medical Director and Headquarters' Legal Counsel of the name and basic circumstances of any detainee with a "Do Not Resuscitate" order in the medical record. In the case of IGSA's, this notification is made through the local ICE representative.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's Warden or designee will notify ICE concerning an ICE detainee's implementation of a Do Not Resuscitate (DNR) Order.
There are guidelines addressing the State Advanced Directive Form for Implementing Living Wills and Advanced Directives. The guidelines include instructions for detainees who wish to have a living will other than the generic form the DIHS provides or who wishes to appoint another to make advance decisions for him or her.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TERMINAL ILLNESS, ADVANCED DIRECTIVES, AND DEATH

Policy All facilities housing ICE detainees shall have policies and procedures addressing the issues of terminal illness or injury, medical advanced directives, and detainee death, to include the procedures to ensure proper notification is provided to ICE officials, family members and other interested parties in the event of a detainee becoming terminally ill or injured or death of a detainee occurs. In addition, the policy will cover procedures to be taken if the death of a detainee occurs while in transit.

☐ Check this box if the facility does not accept ICE detainees who are severely or terminally ill. Indicate NA in the appropriate box for this portion of the worksheet. ALWAYS complete all references to detainee death and related notifications.

Components	Y	N	N/A	Remarks
The facility has written procedures to notify ICE officials, deceased family members and consulates, when a detainee dies while in Service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility's Policy 300-34 The facility's Warden or designee notifies the ICE representative concerning the death of an ICE detainee. ICE notifies the next of kin or the detainee's consulate regarding the death.
The facility has a policy and procedure to address the death of a detainee while in transport.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The transportation of ICE detainees at this facility is the responsibility of the local ICE field office.
The facility follows established policy and procedures describing when to contact the local coroner regarding such issues as: <ul style="list-style-type: none"> • Performance of an autopsy; • Who will perform the autopsy; • Obtaining state approved death certificates; and • Local transportation of the body. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Warden or designee notifies ICE, the police, the county detectives, and the coroner. The coroner performs an autopsy and issues the death certificate.

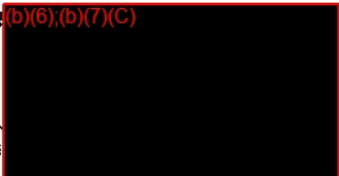
☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Remarks (b)(6),(b)(7)(C) observations, other sources used, etc.)


Auditor's  7/11/2017

Section III

Security and Control Standards

CONTRABAND				
Policy: All detention facilities will ensure the proper handling and disposal of all contraband. Documentation of contraband destruction is required.				
Components	Y	N	N/A	Remarks
The facility follows a written procedure for handling illegal contraband. Staff inventories, holds, and reports it when necessary to the proper authority for action/possible seizure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility Policy 220-01
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (b)(6), (b)(7)(C) observations, other sources used, etc.)

Auditor:  11/2017

DETENTION FILES				
Policy: Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.				
Components	Y	N	N/A	Remarks
A detention file is created for every new arrival whose stay will exceed 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Files are maintained in the admissions area.
The detainee's detention file also contains documents generated during the detainee's custody. <ul style="list-style-type: none"> • Special requests • Any G-589s and/or I-77s closed-out during the detainee's stay • Disciplinary forms/Segregation forms • Grievances, complaints, and the disposition(s) of same 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The detention files are located and maintained in a secured area. If not the cabinets are lockable and distribution of the keys is limited to supervisors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

DETENTION FILES

Policy: Every facility will create a detention file for every ICE detainee booked into the facility, excluding only detainees scheduled to depart within 24 hours. The detention file will contain copies and, in some cases, the original of specified documents concerning the detainee's stay in the facility: classification sheet, medical questionnaire, property inventory sheet, disciplinary documents, etc.

Components	Y	N	N/A	Remarks
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks: (b)(6), (b)(7)(C) (b)(6), (b)(7)(C), observations, other sources used, etc.)

Auditor's: 07/11/2017

DISCIPLINARY POLICY				
Policy: All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.				
Components	Y	N	N/A	Remarks
The facility has a written disciplinary system using progressive levels of reviews and appeals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility rules state that disciplinary action shall not be capricious or retaliatory.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written rules prohibit staff from imposing or permitting the following sanctions: <ul style="list-style-type: none"> • corporal punishment • deviations from normal food service • clothing deprivation • bedding deprivation • denial of personal hygiene items • loss of correspondence privileges • deprivation of physical exercise 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy prohibits staff from imposing any of the sanctions identified in this component.
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This component is outlined in the facility handbook and also included in the orientation video shown in intake.

DISCIPLINARY POLICY				
Policy: All facilities housing ICE detainees are authorized to impose discipline on detainees whose behavior is not in compliance with facility rules and regulations.				
Components	Y	N	N/A	Remarks
Incident Reports are investigated within 24 hours of the incident. The Unit Disciplinary Committee (UDC) or equivalent does not convene before an investigation ends.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Known in-house as "Housing Unit Actions"
A disciplinary panel (or equivalent in IGSA's) adjudicates infractions. The panel: <ul style="list-style-type: none"> • Conducts hearings on all charges and allegations referred by the UDC • Considers written reports, statements, physical evidence, and oral testimony • Hears pleadings by detainee and staff representative • Bases its findings on the preponderance of evidence • Imposes only authorized sanctions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Panel consist of a Sargent, Corporal and a Consular.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)(C)



07/11/2017

EMERGENCY (CONTINGENCY) PLANS

Policy All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Y	N	N/A	Remarks
There is a designated person or persons responsible for emergency plans and their implementation. Sufficient time is allotted to the person or group for development and implementation of the plans.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Deputy Warden of Security is responsible for the emergency plans and their implementation.
Contingency plans include a comprehensive general section with procedures applicable to most emergency situations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency plans include emergency medical treatment for staff and detainees during and after an incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The plans address the following issues: <ul style="list-style-type: none"> Confidentiality Accountability (copies and storage locations) Annual review procedures and schedule Revisions 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

EMERGENCY (CONTINGENCY) PLANS

Policy: All facilities holding ICE detainees will respond to emergencies with a predetermined standardized plan to minimize the harming of human life and the destruction of property. It is recommended that SPCs and CDFs enter into agreement, via Memorandum of Understanding (MOU), with federal, local and state agencies to assist in times of emergency.

Components	Y	N	N/A	Remarks
<input checked="checked" type="checkbox"/> Acceptable				
<input type="checkbox"/> Deficient				
<input type="checkbox"/> At-Risk				
<input type="checkbox"/> Repeat Finding				

Remarks: (b)(6),(b)(7)(C) observations, other sources used, etc.)

Auditor's Signature: _____/11/2017

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: <ul style="list-style-type: none"> • Wear personal protective • Equipment. • Report hazards and spills to the • designated official. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The MSDSs are readily accessible to staff and detainees in the work areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous materials are always issued under proper supervision. <ul style="list-style-type: none"> • quantities are limited. • Staff always supervises detainees using these substances. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
All "flammable" and "combustible" materials (liquid and aerosol) are stored and used according to label recommendations.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inventories are available in all areas where these substances are used or stored.
The facility has sufficient ventilation and provides and ensures clean air exchanges throughout all buildings.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
All toxic and caustic materials stored in their original containers in a secure area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Every employee and detainee using flammable, toxic, or caustic materials receives advance training in their use, storage, and disposal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A technically qualified officer conducts the fire and safety inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility fire safety officer (Captain) receives ongoing training from the Pennsylvania Department of Corrections and OSHA.
The facility has an approved fire prevention, control, and evacuation plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reviewed and approved by the local fire department. Fire Drills occur on a monthly basis.

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
Written procedures regulate the handling and disposal of used needles and other sharp objects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Vents return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Staff are trained to prevent contact with blood and other body fluids and written procedures are followed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility follows standard cleaning procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ENVIRONMENTAL HEALTH AND SAFETY

Policy: Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. The program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g., National Fire Protection Association [NFPA]); Identification of incompatible materials, and safe-handling procedures

Components	Y	N	N/A	Remarks
<input checked="checked" type="checkbox"/> Acceptable	<input type="checkbox"/> Deficient	<input type="checkbox"/> At-Risk	<input type="checkbox"/> Repeat Finding	

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

07/11/2017

Auditor's

HOLD ROOMS IN DETENTION FACILITIES				
Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.				
Components	Y	N	N/A	Remarks
All detainees are given a pat down search for weapons or contraband before being placed in the room.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There is a written evacuation plan that includes a designated officer to remove detainees from hold rooms in case of fire and/or building evacuation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The written evacuation plan for the hold rooms are part of the emergency plans. The supervisor in charge of the admitting and release unit is responsible for evacuating detainees.
Detainees under the age of 18 are not held with adult detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detention in hold rooms is limited to 12 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

HOLD ROOMS IN DETENTION FACILITIES				
Policy: Hold rooms will be used only for temporary detention for detainees awaiting removal, transfer, EOIR hearings, medical treatment, intra-facility movement, or other processing into or out of the facility.				
Components	Y	N	N/A	Remarks
Male and females are segregated from each other.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Officers closely supervise the detention hold rooms using direct supervision (irregular visual monitoring.). <ul style="list-style-type: none"> • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff have direct observation of all hold rooms.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (b)(6),(b)(7)(C) [redacted], observations, other sources used, etc.)

Auditor: [redacted] 07/11/2017

**KEY AND LOCK CONTROL
(SECURITY, ACCOUNTABILITY AND MAINTENANCE)**

Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

Components	Y	N	N/A	Remarks
The security officer, or equivalent in IGSA's, provides training to employees in key control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Deputy Warden of Security has oversight responsibilities. Audits occur quarterly.
The security officer, or equivalent in IGSA's, maintains inventories of all keys, locks and locking devices.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Deputy Warden of Security maintains all inventories of keys and keycards.
Facility policies and procedures address the issue of compromised keys and locks.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Padlocks and/or chains are prohibited from use on cell doors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)				
Policy It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.				
Components	Y	N	N/A	Remarks
The facility has a key accountability policy and procedures to ensure key accountability. The keys are physically counted daily.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Keys are inventoried daily on each shift.
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (b)(6),(b)(7)(C) [Redacted], observations, other sources used, etc.)

Auditor: [Redacted] 07/11/2017

POPULATION COUNTS

Policy: All detention facilities shall ensure around-the-clock accountability for all detainees. This requires that they conduct at least one formal count of the detainee population per shift, with additional formal and informal counts conducted as necessary.

Components	Y	N	N/A	Remarks
Staff conducts a formal count at least once each shift.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Formal counts are conducted seven times a day at 0500, 0700, 1100, 1500, 1800, 2200 and 2300.
A face-to-photo count follows each unsuccessful recount.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If required, staff will positively identify the detainee from a picture file maintained in the housing pod.
The control officer (or other designated position) maintains an out-count record of all detainees temporarily leaving the facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Count is maintained in the admitting and release area.
Written procedures cover informal and emergency counts. <ul style="list-style-type: none"> • They followed during informal counts. • During emergencies. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable

☐ Deficient

☐ At-Risk

☐ Repeat Finding

Ref: (b)(6),(b)(7)(C) [redacted] (ts, observations, other sources used, etc.)

Aud: [redacted] 07/11/2017

POST ORDERS				
Policy: ICE provides officers all necessary guidance for carrying out their duties. This guidance includes the post orders established for every post, which are reviewed at least annually, and given to each officer upon assignment to that post.				
Components	Y	N	N/A	Remarks
Every Fixed post has a set of post orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All post orders are available
Every armed-post officer qualifies with the post weapon(s) before assuming post duty.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff are firearms certified prior to being assigned to a post that requires a firearm. Officers qualify on a yearly basis.
The IGSA maintains a complete set (central file) of post orders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintained electronically.
A review/updating/reissuing of post orders occurs regularly and at a minimum, annually.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

POST ORDERS				
Policy: ICE provides officers all necessary guidance for carrying out their duties. This guidance includes the post orders established for every post, which are reviewed at least annually, and given to each officer upon assignment to that post.				
Components	Y	N	N/A	Remarks
Armed-post post orders provide instructions for escape attempts.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

07/11/2017

Auditor

SECURITY INSPECTIONS				
Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.				
Components	Y	N	N/A	Remarks
The facility has a comprehensive security inspection policy. The policy specifies: <ul style="list-style-type: none"> • Posts to be inspected • Required inspection forms • Frequency of inspections • Guidelines for checking security features • Procedures for reporting weak spots, inconsistencies, and other areas needing improvement 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility complies with all applicable provisions of this component.
All visits are officially recorded in a visitor logbook or electronically recorded.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The facility has a written policy and procedures to prevent the introduction of contraband into the facility or any of its components.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tools being taken into the secure area of the facility are inventoried before entering and prior to departure.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All tools are inventoried before being taken into or out of the secure area of the facility.

SECURITY INSPECTIONS				
Policy: Post assignments in the facility's high-risk areas, where special security procedures must be followed, will be restricted to experienced personnel with a thorough grounding in facility operations.				
Components	Y	N	N/A	Remarks
Written procedures govern searches of detainee housing units and personal areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks (b)(6), (b)(7)(C) [Redacted] facts, observations, other sources used, etc.)

Audit Date: 07/11/2017

SPECIAL MANAGEMENT UNIT (SMU)
Administrative Segregation

Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components	Y	N	N/A	Remarks
<p>The detainees are provided:</p> <ul style="list-style-type: none"> Barbering services; Recreation privileges in accordance with the "Detainee Recreation" standard; Non-legal reading material; Religious material; The same correspondence privileges as detainees in the general population; Telephone access similar to that of the general population; and <p>Personal legal material.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Procedures comply with the "Visitation" standard.</p> <ul style="list-style-type: none"> The detainee retains visiting privileges; and <p>The visiting room is available during normal visiting hours.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Visits from clergy are allowed.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation				
Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).				
Components	Y	N	N/A	Remarks
Detainees have the same law-library access as the general population. <ul style="list-style-type: none"> Are they required to use the law library: <div> <input type="checkbox"/> Separately or <input type="checkbox"/> As a group? </div> Are legal materials brought to them?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All inmates receive the same amount of access to the legal library. Inmates housed in the administrative detention and disciplinary segregation need to go thru their Inmate Service Coordinator and ask for materials instead of visiting the library in person.
SPC procedures include completing the SMU Housing Record (I-888) immediately upon a detainee's placement in the SMU. <ul style="list-style-type: none"> Staff completes the form at the end of each shift. CDFs and IGSA facilities use Form I-888 (or local equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility uses a local equivalent of form I-888.
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. Detainees are placed in the SMU (administrative) in accordance with written criteria.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. A copy of the order given to the detainee within 24 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SPECIAL MANAGEMENT UNIT (SMU) Administrative Segregation				
Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).				
Components	Y	N	N/A	Remarks
The OIC (or equivalent) routinely notifies the Field Office Director (or staff officer in charge of IGSAs) any time a detainee's stay in administrative detention exceeds 30 days. Upon notification that the detainee's administrative segregation has exceeded 60 days, the FD forwards written notice to HQ Field Operations Branch Chief for DRO.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The OIC (or equivalent) reviews the case of every detainee who objects to administrative segregation after 30 days in the SMU. <ul style="list-style-type: none"> A written record is made of the decision and the justification. The detainee receives a copy of this record. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A health care professional visits every detainee at least three times a week. <ul style="list-style-type: none"> The shift supervisor visits each detainee daily. Weekends and holidays. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A nurse visits the unit on a daily basis.
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SPECIAL MANAGEMENT UNIT (SMU)**Administrative Segregation**

Policy: The Special Management Unit required in every facility isolates certain detainees from the general population. The Special Management Unit will consist of two sections. One, Administrative Segregation, houses detainees isolated for their own protection; the other for detainees being disciplined for wrongdoing (see the "Special Management Unit [Disciplinary Segregation]" standard).

Components	Y	N	N/A	Remarks
All cells are equipped with beds. Every bed is securely fastened to the floor or wall.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The SMU maintains a permanent log. <ul style="list-style-type: none">• Detainee-related activity, e.g., meals served, recreation, visitors etc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding

Remarks: (b)(6),(b)(7)(C) [REDACTED] (ts, observations, other sources used, etc.)

Auditor: [REDACTED] 07/11/2017

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
Officers placing detainees in disciplinary segregation follow written procedures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The sanctions for violations committed during one incident are limited to 60 days.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Facility sanctions are limited to 30 days.
A completed Disciplinary Segregation Order accompanies the detainee into the SMU. The detainee receives a copy of the order within 24 hours of placement in disciplinary segregation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Standard procedures include reviewing the cases of individual detainees housed in disciplinary detention at set intervals. After each formal review, the detainee receives a written copy of the decision and supporting reasons.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees placed in disciplinary segregation have their status reviewed prior to release and or every 7 days. Detainees receive copies of any decisions.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility only utilizes a dry cell setting in the medical unit under the supervision of medical staff.
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day. Food is not used as punishment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SMU detainees have law library access. <ul style="list-style-type: none"> Violent/uncooperative detainees retain access to the law library unless adjudicated a security threat in writing. Legal material brought to individuals in the SMU on a case-by-case basis. Staff documents every incident of denied access to the law library. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When requested, legal materials are brought to the detainees unless it is considered a security risk. Any denial of access would be documented.

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
When phone access is limited by number or type of calls, limits do not apply to the following: <ul style="list-style-type: none"> • Calls about the detainee's immigration case or other legal matters. • Calls to consular/embassy officials. • Calls during family emergencies (as determined by the OIC/Warden). 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Detainees receive, unless documented as a threat to security: <ul style="list-style-type: none"> • Barbering services; • Recreation privileges; • Other-than-legal reading material; • Religious material; • The same correspondence privileges as other detainees; and • Personal legal material. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A health care professional visits every detainee in disciplinary segregation every day, Monday through Friday. <ul style="list-style-type: none"> • The shift supervisor visit each segregated detainee daily • Weekends and holidays. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Visits from clergy are allowed. <ul style="list-style-type: none"> • The clergy member given the option of visiting/not visiting the segregated detainee. • Violent/uncooperative detainees denied access to religious services when safety and security would otherwise be affected. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SPECIAL MANAGEMENT UNIT (Disciplinary Segregation)				
Policy: Each facility will establish a Special Management Unit in which to isolate certain detainees from the general population. The Special Management Unit will have two sections, one for detainees in Administrative Segregation; the other for detainees being segregated for disciplinary reasons.				
Components	Y	N	N/A	Remarks
SMU detainees receive legal visits, as provided in the "Visitation" standard. Legal service providers are notified of security concerns arising before a visit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

Auditor:  07/11/2017

TOOL CONTROL				
Policy: It is the policy of all facilities that all employees shall be responsible for complying with the tool control policy. The Maintenance Supervisor shall maintain a computer generated or typewritten Master Inventory list of tools and equipment and the location in which tools are stored. These inventories shall be current, filed and readily available for tool inventory and accountability during an audit.				
Components	Y	N	N/A	Remarks
There is an individual who is responsible for developing a tool control procedure and an inspection system to insure accountability.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A shift commander (captain) is responsible for developing a tool control procedure and the inspection system.
The facility has a policy for the regular inventory of all tools. <ul style="list-style-type: none"> The policy sets minimum time lines for physical inventory and all necessary documentation. ICE facilities use AMIS bar code labels when required. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Each facility has procedures for the issuance of tools to staff and detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> At-Risk <input type="checkbox"/> Repeat Finding				

Ref: (b)(6),(b)(7)(C) [redacted] observations, other sources used, etc.)

11/2017

Aud

**TRANSPORTATION
(Land Transportation)**

Policy The Immigration and Naturalization Service will take all necessary precautions to protect the lives, safety, and welfare of our officers, the general public, and those in ICE custody during the transportation of detainees. Standards have been established for professional transportation under the supervision of experienced and trained Detention Enforcement Officers or authorized contract personnel.

☒ **Standard NA:** Check this box if all ICE Transportation are handled only by the ICE Field Office or Sub-Office in control of the detainee case.

Components	Y	N	N/A	Remarks
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transporting officers: <ul style="list-style-type: none"> • Limit driving time to 10 hours in any 15 hour period; • Drive only after eight consecutive off-duty hours; • Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; • Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; • During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☐ Acceptable ☐ Deficient ☐ At-Risk ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

 Aud _____ 11/2017

USE OF FORCE

Policy: The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:

Components	Y	N	N/A	Remarks
Written policy authorizes staff to respond in an immediate-use-of-force situation without a supervisor's presence or direction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Policy 210-01
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written policy asserts that calculated rather than immediate use of force is feasible in most cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

USE OF FORCE

Policy: The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee

Components	Y	N	N/A	Remarks
<p>The facility subscribes to the prescribed Confrontation Avoidance Procedures.</p> <ul style="list-style-type: none"> Ranking detention official, health professional, and others confer before every calculated use of force. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Staff:</p> <ul style="list-style-type: none"> Does not use force as punishment. Attempts to gain the detainee's voluntary cooperation before resorting to force Uses only as much force as necessary to control the detainee. Uses restraints only when other non-confrontational means, including verbal persuasion, have failed or are impractical. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All items identified in this component are addressed in Policy 210-01.
<p>Staff members are trained in the performance of the Use-of-Force Team Technique.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>Standard procedures associated with using four/five point restraints include:</p> <div style="background-color: black; color: red; padding: 5px;">(b)(7)(E)</div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Four and five point restraints are utilized, if necessary. The facility also has a bed in the medical unit and a restraint chair, if needed.

USE OF FORCE

Policy: The U.S. Department of Homeland Security authorizes the use of force only as a last alternative after all other reasonable efforts to resolve a situation have failed. Only that amount of force necessary to gain control of the detainee, to protect and ensure the safety of detainees, staff and others, to prevent serious property damage and to ensure institution security and good order may be used. Physical restraints necessary to gain control of a detainee who appears to be dangerous may be employed when the detainee:

Components	Y	N	N/A	Remarks
stiffness. • Medical evaluation of the restrained detainee twice per eight-hour shift. • When qualified medical staff are not immediately available, staff position the detainee "face-up."				
The shift supervisor monitors the detainee's position/condition every two hours. He/she allows the detainee to use the restroom at these times under safeguards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The detainee is never left unattended and is under constant video monitoring. The facility complies with the requirements of the component.
All use-of-force incidents are documented and reviewed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All use of force incidents are reviewed by the shift supervisors, the Deputy Warden of Security and the Warden.
All detainee checks are logged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

USE OF FORCE

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Components	Y	N	N/A	Remarks
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When the OIC authorizes use of non-lethal weapons: <ul style="list-style-type: none"> Medical staff is consulted before staff use pepper spray/non-lethal weapons. Medical staff review the detainee's medical file before use of a non-lethal weapon is authorized. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical is always consulted prior to any planned use of force and initiates actions required by this component.
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Special precautions are taken when restraining pregnant detainees. Medical personnel are consulted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

USE OF FORCE

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Components	Y	N	N/A	Remarks
<input checked="checked" type="checkbox"/> Acceptable		<input type="checkbox"/> Deficient	<input type="checkbox"/> At-Risk	<input type="checkbox"/> Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6),(b)(7)(C)

07/11/2017

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STAFF DETAINEE COMMUNICATIONS

Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainee and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Components	Y	N	N/A	Remarks
ICE Detainees are notified in writing upon admission to the facility of their right to correspond with ICE staff regarding their case or conditions of confinement.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Scheduled visits are posted in ICE detainee areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
The ICE Field Office Director ensures that weekly announced and unannounced visits occur at the IGSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A DO visits weekly and as needed.
Detention and Deportation Staff conduct scheduled weekly visits with detainees held in the IGSA.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A DO visits the facility weekly, scheduled visits usually being Monday.

STAFF DETAINEE COMMUNICATIONS

Policy: Procedures must be in place to allow for formal and informal contact between key facility staff and ICE staff and ICE detainees and to permit detainees to make written requests to ICE staff and receive an answer in an acceptable time frame.

Components	Y	N	N/A	Remarks
ICE/DRO staff respond to a detainee request from a facility within 72 hours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE staff usually respondes within 24 hours.
The facility treats detainee correspondence to ICE/ERO staff as Special Correspondence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ICE information request Forms are available at the IGSA for use by ICE detainees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Information request forms are available to detainees, in the housing units. Information Request Forms are faxed to the ICE field office when they are submitted.

☒ Acceptable
☐ Deficient
☐ At-Risk
☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

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DETAINEE TRANSFER STANDARD

Policy: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Y	N	N/A	Remarks
The detainee is provided with a completed Detainee Transfer Notification Form.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainee Transfer Notification Forms are issued during processing at the Pittsburgh sub office.
Detainee's funds, valuables and property are returned and transferred with the detainee to his or her new location.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Meals are provided when transfers occur during normally schedule meal times.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All detainees being transferred from this facility are sent to the Pittsburgh Field Office, a trip of approximately two hours in duration. Meals are provided for detainees upon arrival at the field office.

DETAINEE TRANSFER STANDARD

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Components	Y	N	N/A	Remarks
<p>Facility policy mandates that:</p> <ul style="list-style-type: none"> • Times and transfer plans are never discussed with the detainee prior to transfer. • The detainee is not notified of the transfer until immediately prior to departing the facility. • The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>For medical transfers:</p> <ul style="list-style-type: none"> • The Division of Immigration Health Services (DIHS) Medical Director or designee approves the transfer. • Medical transfers are coordinated through the local ICE/ERO office. • A medical transfer summary is completed and accompanies the detainee. 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All transfers of ICE detainees are coordinated between ICE and the facility medical staff. Appropriate medical information is provided to ICE staff to ensure the safety of the detainees being transferred.</p>

DETAINEE TRANSFER STANDARD

Policy: ICE will make all necessary notifications when a detainee is transferred. If a detainee is being transferred via the Justice Prisoner Alien Transportation System (JPATS), ICE will adhere to JPATS protocols. In deciding whether to transfer a detainee, ICE will take into consideration whether the detainee is represented before the immigration court. In such cases, the Field Office Director will consider the detainee's stage within the removal process, whether the detainee's attorney is located within reasonable driving distance of the facility, and where the immigration court proceedings are taking place.

Components	Y	N	N/A	Remarks
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number and the envelope is marked Medical Confidential.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	There are no DIHS staff assigned to this facility.
For medical transfers, transporting officers receive instructions regarding medical issues.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ **Acceptable**

 ☐ **Deficient**

 ☐ **At-Risk**

 ☐ **Repeat Finding**

Remarks: (Record significant facts, observations, other sources used, etc.)

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7/11/2017

The following items must be inspected for compliance with those Justice Core Standards not covered by the ICE Detention Standards:

Standard – Policy Development and Monitoring		Y	N	N/A
1	Written Policy and Procedures are in place to provide staff with the necessary information to operate and maintain the facility on a daily basis and in accordance with local, state, and federal law	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Written policy and procedure are reviewed annually and updated accordingly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard – Reporting Requirement				
3	The facility provides for a system of monitoring through internal audits and reviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	The internal administrative audit is separate from any external audits or reviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Audit or inspection reports identify areas of concern, identify necessary corrective action, and provide for a system follow-up	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Audit and Inspection reports are maintained on file until at least the next review is conducted	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard – Direct Supervision				
7	To the extent Possible, physical plant design facilitates continuous personal contact and interaction between staff and detainees in the housing unit and recreation / leisure areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Written policies and procedures are in place that outline a comprehensive program that promotes and encourages staff/detainee communications. A daily rotation schedule should be established to ensure adequate staff coverage is provided throughout the meal.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standard – Cultural Diversity				
9	Staff are provided appropriate annual cultural diversity or sensitivity training. Such training is designed and implemented in a fashion that will further enhance staff members' ability to communicate with detainees in an effective manner.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOJ Core Standards - Rating IGSA's Only				
<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Deficient <input type="checkbox"/> Repeat Deficiency <input type="checkbox"/> At-Risk				

*Remarks (b)(6);(b)(7)(C) Significant facts, observations, other sources used, etc.)

Auditor:  07/11/2017

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

Policy: This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
The facility has a Sexual Abuse and Assault Prevention and Intervention Program consistent with the ICE Zero Tolerance Policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All staff are trained during orientation and in annual refresher training in the prevention and intervention areas required by the Detention Standard.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refresher training is provided on a yearly basis.
The facility maintains written documentation verifying employee, volunteer, and contractor training.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Components	Y	N	N/A	Remarks
Detainees are informed about the program in facility orientation and in the detainee handbook (or equivalent).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Detainees are provided a copy of the ICE National Detainee Handbook upon admission to the facility. The handbook provides information on said subject as well as contact information to alert ICE.
The Sexual Assault Awareness Notice is posted on all housing unit bulletin boards.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ICE Sexual Assault Awareness Notices are posted in all housing units.
Detainees are screened upon arrival for "high risk" sexual assaultive and sexual victimization potential, and housed and counseled accordingly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

Policy: This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
A detainee who is subjected to sexual abuse or assault is not returned to general population until proper re-classification, taking into consideration any increased vulnerability of the detainee as a result of the sexual abuse or assault, is completed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
There is prompt and effective intervention when any detainee is sexually abused or assaulted, and policy and procedures for required chain-of-command and immediate ICE reporting.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's warden or his designee notify the ICE representative concerning any sexual abuse or assault immediately.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

Policy: This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
The facility uses a coordinated, multidisciplinary team approach to responding to sexual abuse, such as a sexual assault response team (SART), which includes a medical practitioner, a mental health practitioner, a security staff member, and an investigator from the assigned investigative entity, as well as representatives from outside entities that provide relevant services and expertise.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Care is taken to place a victimized detainee in a supportive environment that represents the least restrictive housing option available (e.g. protective custody), but victims are not held for longer than five days in any type of administrative segregation except in highly unusual circumstances or at the request of the detainee.	X			

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Components	Y	N	N/A	Remarks
Staff suspected of perpetrating sexual abuse or assault are removed from all duties requiring detainee contact pending the outcome of an investigation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staff members would be placed on limited "desk" duty or receive admin leave pending investigation.
When there is an alleged sexual assault, staff conduct a thorough investigation, gather and maintain evidence, and make referrals to appropriate law enforcement agencies for possible prosecution.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Erie Police Department would be contacted as well as the Erie District Attorney.

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

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Components	Y	N	N/A	Remarks
When there is an alleged or proven sexual assault, the required notifications are promptly made to facility supervisors and ICE management.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The facility's warden or his designee notify the ICE representative concerning any sexual abuse or assault immediately.
Victims of sexual abuse or assault are referred to specialized community resources for treatment and gathering of evidence.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SEXUAL ABUSE AND ASSAULT PREVENTION AND INTERVENTION

Policy: This Detention Standard requires that facilities that house ICE/DRO detainees affirmatively act to prevent sexual abuse and assaults on detainees, provide prompt and effective intervention and treatment for victims of sexual abuse and assault, and control, discipline, and prosecute the perpetrators of sexual abuse and assault.

Components	Y	N	N/A	Remarks
Tracking statistics and reports are readily available for review by the inspectors.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

☒ Acceptable
 ☐ Deficient
 ☐ At-Risk
 ☐ Repeat Finding

Remarks: (Record significant facts, observations, other sources used, etc.)

(b)(6), (b)(7)(C)

7/11/2017

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